

## OPERATION EVALUATION

SOMALIA Protracted Relief and Recovery Operation (200443)  
Strengthening Food and Nutrition Security and Enhancing Resilience  
June 2012 – December 2015

### Mid-term Evaluation Report

[April, 2015]

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**World Food Programme**

**DARA**

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## **Disclaimer**

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## Operational Fact Sheet

OPERATION				
<b>Type/Number/Title</b>	Protracted Relief and Recovery Operation (PRRO) 200443: Strengthening Food and Nutrition Security and Enhancing Resilience; Somalia			
<b>Approval</b>	November 2012			
<b>Amendments</b>	<p>There have been two amendments/budget revisions (BR):</p> <p><b>BR1:</b> approved in May 2013. <b>Increased</b> the <b>Landside Transport, Storage and Handling rate</b> from US\$307.86/mt to US\$425.07/mt, resulting in a total budget revision increasing the overall budget by US\$54 million.<sup>1</sup></p> <p><b>BR2:</b> approved in July 2014. Reduced the overall PRRO budget by US\$51.1 million in response to the improved food security situation. BR2 <b>decreased the number of planned beneficiaries</b> for 2014 by 15.2%, <b>moved security costs</b> from the PRRO budget to a special operation, <b>increased capacity development costs</b> by 64%, and <b>increased cash and voucher associated costs</b> by 15%.<sup>2</sup></p>			
<b>Duration</b>	<u>Initial:</u> 3 years (Jan 2013–Dec 2015)		<u>Revised:</u> 3 years (Jan 2013-Dec 2015)	
<b>Planned beneficiaries</b>	<u>Initial:</u> <sup>3</sup> 2013: 1,560,000; 2014: 1,584,000; 2015: 1,605,000 Total: 2,874,000		<u>Revised:</u> <sup>4</sup> 2013: 1,560,000; 2014: 1,342,500; 2015: 1,931,500 Total: 2,632,500	
<b>Planned food requirements</b>	<u>Initial:</u> <sup>5</sup> In-kind food: 498,069 mt of food commodities Cash and vouchers: US\$42 million Capacity Development: US\$1.5 million		<u>Revised:</u> <sup>6</sup> In-kind food: 443,607 mt of food commodities Cash and vouchers: US\$42.1 million Capacity Development: US\$2.5 million	
<b>US\$ requirements</b>	<u>Initial:</u> 862,886,857		<u>Revised:</u> 866,365,430	
OBJECTIVES AND ACTIVITIES <sup>7</sup>				
	<b>Overall Objective</b>	To enhance resilience in communities and households affected by recurrent shocks, and to ensure that WFP can continue to save lives in emergencies and protect livelihoods		
	<b>WFP Strategic Objectives (SOs) according to Strategic Plan 2008 - 2013</b>	<b>WFP Strategic Objectives (SOs) according to Strategic Plan 2014 - 2017</b>	<b>Operation Specific Objectives and Outcomes according to Project Document 2012</b>	<b>Activities according to Project Document 2012</b>
MDGs 1, 2, 3, 4, 5	<b>SO1:</b> Save lives and protect livelihoods in emergencies	<b>SO1:</b> Save lives and protect livelihoods in emergencies	<p><b>Objective 3:</b> Protecting livelihoods during shocks and seasonal vulnerabilities</p> <p><b>Outcome 1.1:</b> Stabilized acute malnutrition in children &lt;5 in targeted areas</p> <p><b>Outcome 1.2:</b> Improved food consumption of period of assistance period for targeted households</p>	<ul style="list-style-type: none"> <li>• BSF - seasonal</li> <li>• CFA/FFA</li> <li>• Household Relief (cash, food)</li> <li>• Wet feeding</li> <li>• Contingency household relief cash/food</li> </ul>

<sup>1</sup> Somalia PRRO 200443 BR1

<sup>2</sup> TOR and BR2 revised 24 April 2014

<sup>3</sup> PRRO Project Document

<sup>4</sup> Standard Project Report 2013

<sup>5</sup> PRRO Project Document

<sup>6</sup> BR2 Revised 24 April 2014

<sup>7</sup> PRRO Project Document

	<b>SO2:</b> Prevent acute hunger and invest in disaster preparedness and mitigation measures	<b>SO2:</b> Support or restore food security and nutrition and establish or rebuild livelihoods in fragile settings and following emergencies	<p><b>Objective 1:</b> Enhancing medium-term and long-term resilience in vulnerable communities through increased engagement with stakeholders</p> <p><b>Outcome 2.1:</b> Early Warning Systems, contingency plans and food security monitoring systems and enhanced with WFP capacity development support</p> <p><b>Outcome 2.2:</b> Hazard risk reduced in targeted communities</p>	CFA/FFA/FFT
	<b>SO3:</b> Restore and rebuild lives and livelihoods in post-conflict, post-disaster or transition situations	<b>SO3:</b> Reduce risk and enable people, communities and countries to meet their own food and nutrition needs	<p><b>Objective 2:</b> Rebuilding food and nutrition security in households affected by shocks</p> <p><b>Outcome 3.1:</b> Enrolment for girls and boys, including IDPs and returnees, in assisted schools stabilized at pre-crisis levels</p> <p><b>Outcome 3.2:</b> Reduced acute malnutrition in targeted populations</p> <p><b>Outcome 3.3:</b> Improved nutritional recovery of ART and TB clients</p> <p><b>Outcome 3.4:</b> Increased access to productive assets</p>	<ul style="list-style-type: none"> <li>• CFA/FFA/FFT</li> <li>• MCH clinics, preventative health and nutrition</li> <li>• Delivery incentive for MCH clinics</li> <li>• TSFP</li> <li>• School meals</li> <li>• Cash/food incentive for girls' attendance</li> <li>• TB/HIV nutrition, institutional feeding and household support</li> </ul>
	<b>SO4:</b> Reduce chronic hunger and undernutrition	<b>SO4:</b> Reduce undernutrition and break the intergenerational cycle of hunger		
	<b>SO5:</b> Strengthen the Capacities of countries to reduce hunger, including through hand-over strategies and local purchase		<b>Outcome 5.1:</b> Progress made towards government-owned hunger solutions	Training government counterparts in programme design and planning, implementation procedures and practices
	<p><b>Crosscutting outcomes</b> from the revised logical framework (revised August 2014):</p> <ul style="list-style-type: none"> <li>• Gender equality and empowerment improved</li> <li>• Food assistance interventions coordinated and partnerships developed and maintained</li> <li>• WFP assistance delivered and utilized in safe, accountable and dignified conditions</li> </ul>			

PARTNERS	
<b>Government</b>	Ministry of Education (Somaliland, Puntland), Ministry of Environment, wildlife, and tourism, Puntland Highway Authority, Ministry of Agriculture (Somaliland), Ministry of Livestock (Somaliland), Ministry of civil aviation, Ministry of Health (Mogadishu, Puntland, Somaliland), Ministry of Interior (Mogadishu, Puntland), Ministry of Agriculture & Irrigation Puntland (MOAI), Puntland Local Authority, Food Assistance Coordination Agency Somaliland (FACA), Humanitarian Aid Disaster Management Agency (HADMA), National Environment Research and Drought (NERAD)
<b>United Nations</b>	UNICEF, FAO, Somalia Food Security and Nutrition Analysis Unit (FSNAU), WHO, UNHCR, UNDP, Clusters (Food Security, Education, Health, Logistics, Nutrition, Protection, Shelter, WASH), UNON, UNDSS
<b>NGOs</b>	Somalia Red Crescent Society, over 160 national NGOs and over 20 international NGOs

RESOURCES (INPUTS)														
<p><b>Contribution received (by 31 December 2014)<sup>8</sup>:</b> US\$349,980,813 <b>Requirements: US\$866,365,430</b> <b>% against appeal: 40 %</b></p> <p><b>Top 5 donors<sup>9</sup>:</b></p> <table border="1"> <thead> <tr> <th>Donors</th> <th>Share of received funds</th> </tr> </thead> <tbody> <tr> <td>USA</td> <td>49%</td> </tr> <tr> <td>UK</td> <td>7%</td> </tr> <tr> <td>Multilateral</td> <td>7%</td> </tr> <tr> <td>Canada</td> <td>6%</td> </tr> <tr> <td>Japan</td> <td>4%</td> </tr> </tbody> </table>	Donors	Share of received funds	USA	49%	UK	7%	Multilateral	7%	Canada	6%	Japan	4%	<p><b>Figure 1: Contribution received vs. required</b></p>	<p><b>Figure 2: Operation's donors</b></p>
Donors	Share of received funds													
USA	49%													
UK	7%													
Multilateral	7%													
Canada	6%													
Japan	4%													
OUTPUTS <sup>10</sup>														
<b>Number and percentage of beneficiaries by programme component<sup>11</sup></b>														

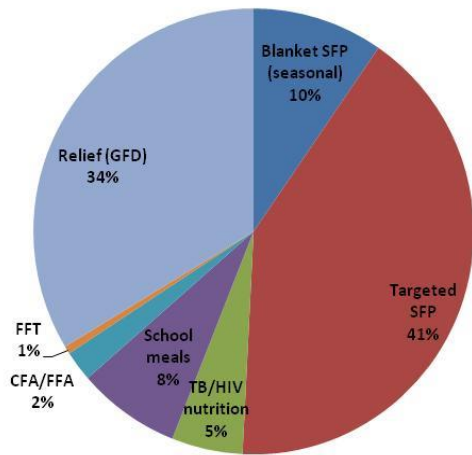
<sup>8</sup> Information provided by CO

<sup>9</sup> Carryover from previous operations represents 15% of received funds

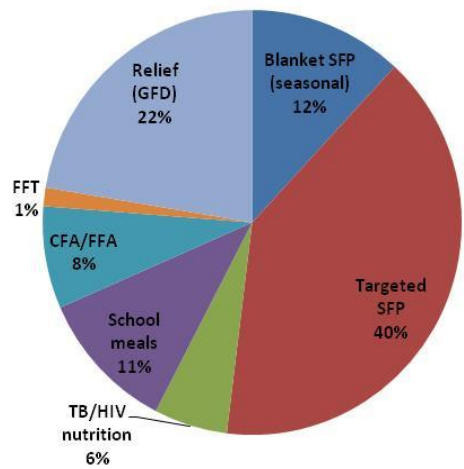
<sup>10</sup> Categorisation of activities varies due to the different way in which activities are reported in the SPR vs the PRRO Project Document. The graphs included in the Operation Factsheet are based on the SPR categorization.

<sup>11</sup> For Figures 3 to 12, CFA/FFA and FFT activities include data for participants instead of beneficiaries, so they seem smaller in size than they should. ET has not received number of beneficiaries for these activities from the CO.

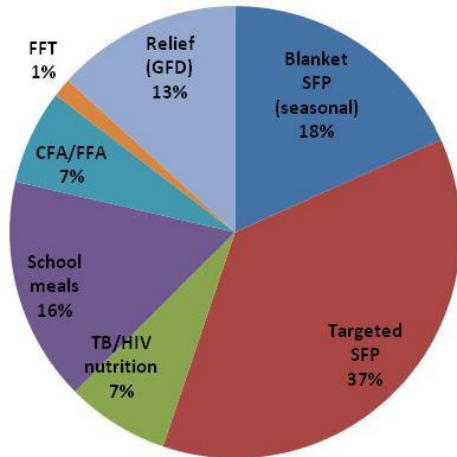
**Figure 3: Planned % of beneficiaries by component/activity (2013)<sup>12,13</sup>**



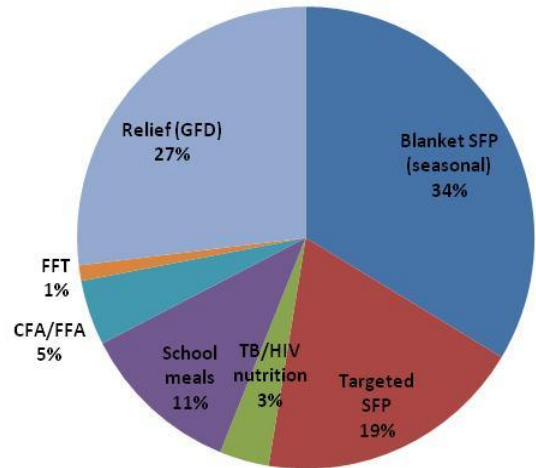
**Figure 4: Actual % of beneficiaries by component/activity (2013)<sup>14</sup>**



**Figure 5: Planned % of beneficiaries by component/activity (2014)<sup>15</sup>**



**Figure 6: Actual % of beneficiaries by component/activity (2014)<sup>16</sup>**



<sup>12</sup> Standard Project Report 2013.

<sup>13</sup> Some activity categories such as Food Assistance for Asset (FFA) are used for both relief and recovery. The division between relief and recovery is fluid.

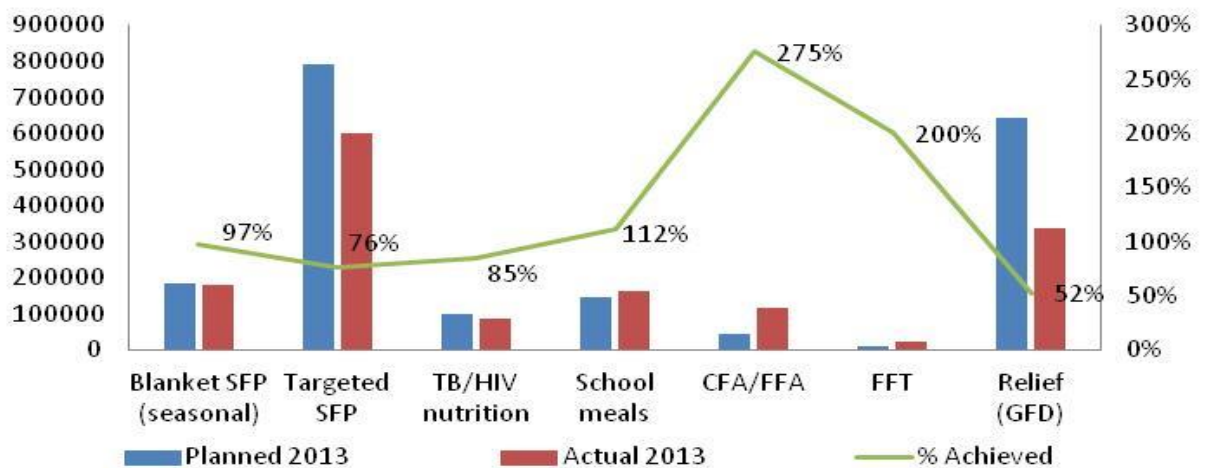
<sup>14</sup> Standard Project Report 2013.

<sup>15</sup> Standard Project Report 2014 (preliminary).

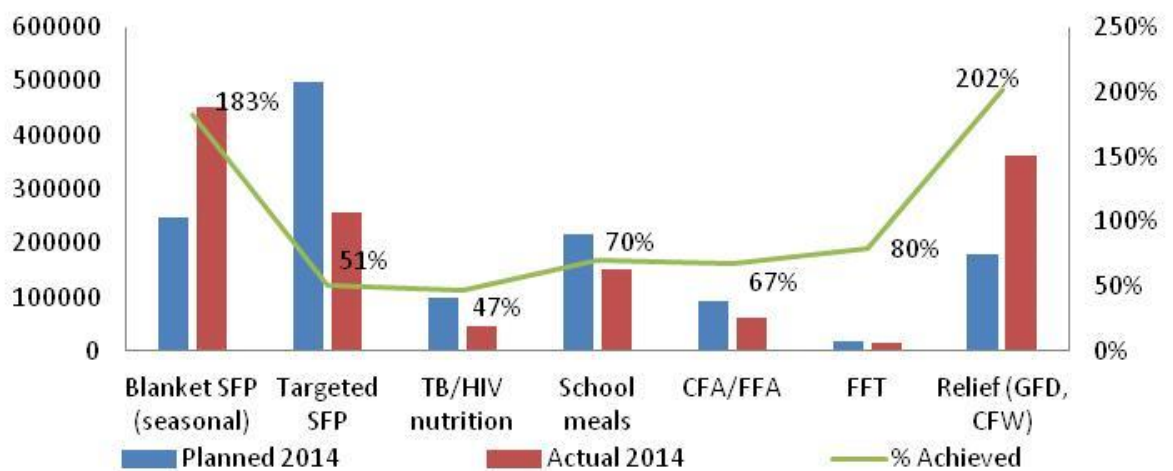
<sup>16</sup> Standard Project Report 2014 (preliminary).



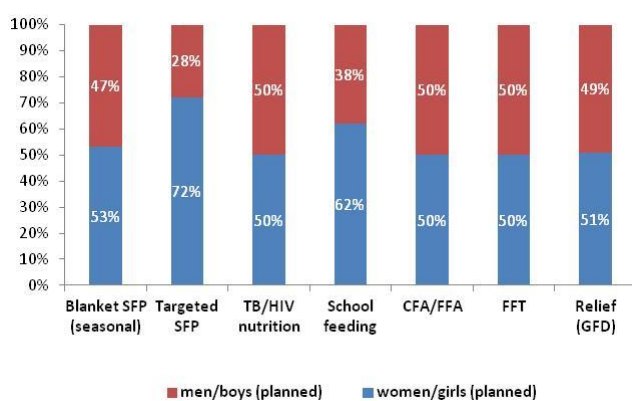
**Figure 7: Number of planned and actual beneficiaries by component (2013)<sup>17</sup>**



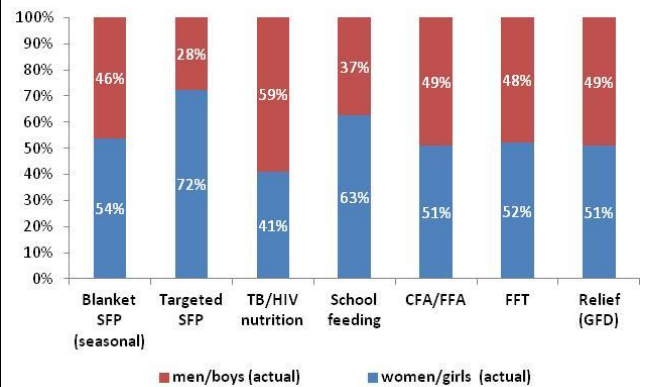
**Figure 8: Number of planned and actual beneficiaries by component (2014)<sup>18</sup>**



**Figure 9: Planned % of women/girls vs. men/boys by component (2013)<sup>19</sup>**



**Figure 10: Actual % of women/girls vs. men/boys by component (2013)<sup>20</sup>**



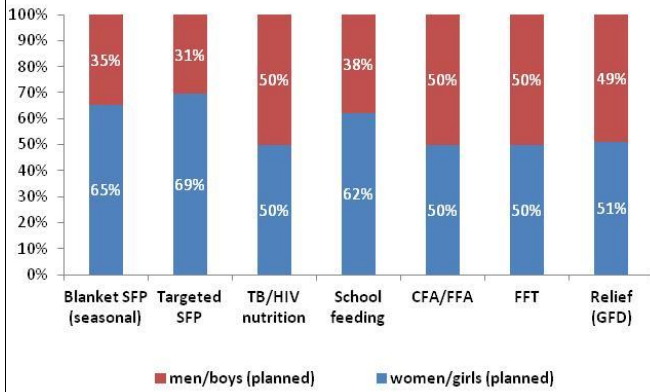
<sup>17</sup> Standard Project Report 2013.

<sup>18</sup> Standard Project Report 2014 (preliminary).

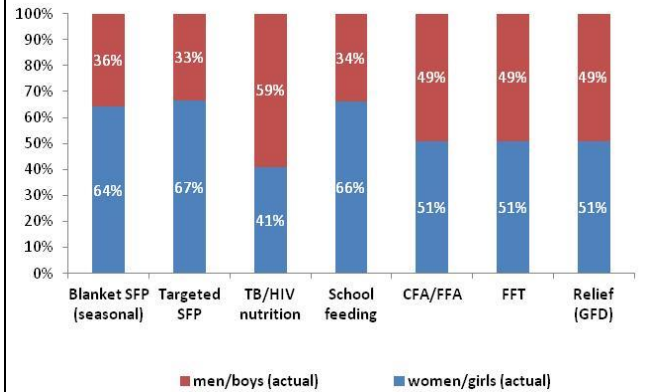
<sup>19</sup> Standard Project Report 2013.

<sup>20</sup> Standard Project Report 2013.

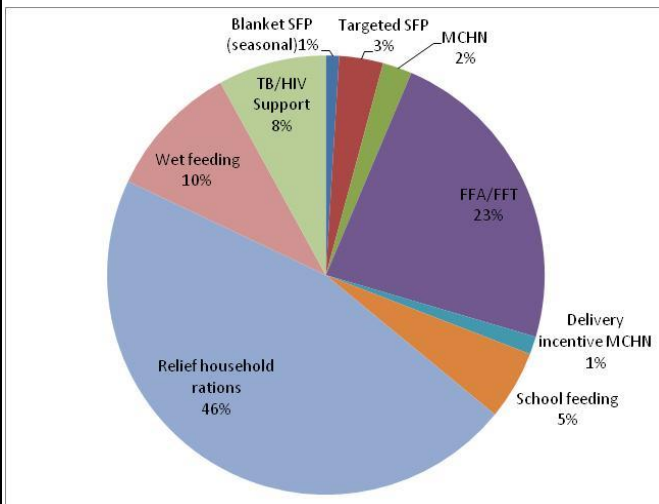
**Figure 11: Planned % of women/girls vs. men/boys by component (2014)<sup>21</sup>**



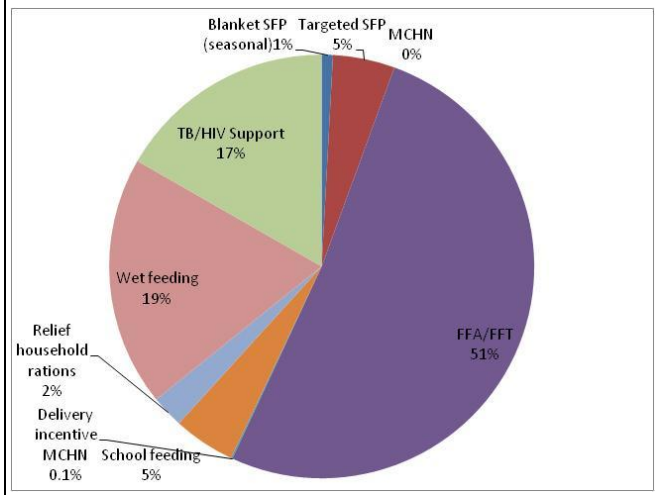
**Figure 12: Actual % of women/girls vs. men/boys by component (2014)<sup>22</sup>**



**Figure 13: Planned % of total food distributed by component (2013)<sup>23</sup>**



**Figure 14: Actual % of total food distributed by component (2013)<sup>24</sup>**



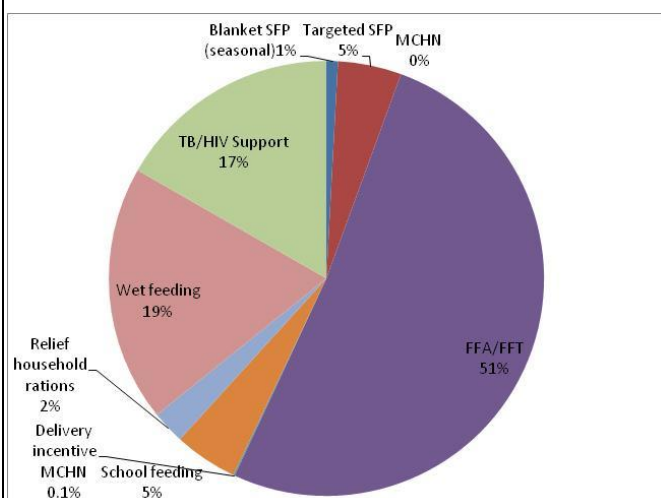
<sup>21</sup> Standard Project Report 2014 (preliminary).

<sup>22</sup> Standard Project Report 2014 (preliminary).

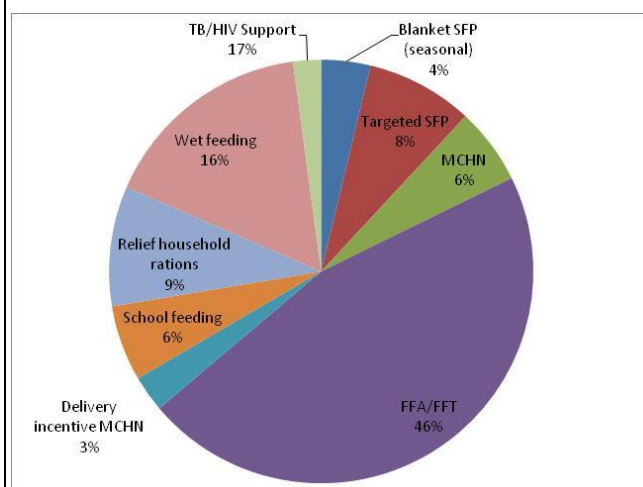
<sup>23</sup> Data provided by Country Office.

<sup>24</sup> Data provided by Country Office.

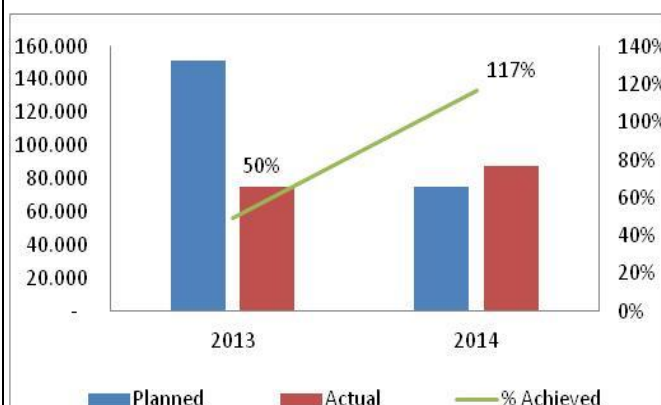
**Figure 15: Planned % of total food requirements by component (2014)<sup>25</sup>**



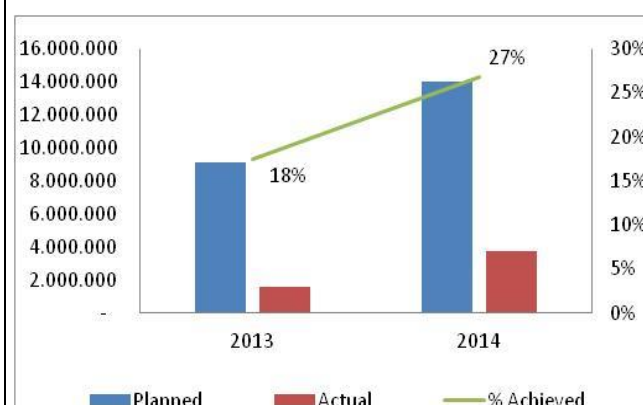
**Figure 16: Actual % of total food requirements by component (2014)<sup>26</sup>**



**Figure 17: Actual food tonnage distributed vs. planned<sup>27</sup>**



**Figure 18: Actual value of cash transfers distributed vs. planned<sup>28</sup>**



OUTCOME INDICATORS		Baseline	Target	SPR 2013	SPR 2014
<b>CROSS-CUTTING RESULTS</b>					
<b>PROTECTION: WFP assistance delivered and utilized in safe, accountable and dignified conditions</b>	Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)		80		82
	Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme sites		90		100

<sup>25</sup> Data provided by Country Office.

<sup>26</sup> Data provided by Country Office.

<sup>27</sup> Standard Project Report 2013 and 2014 (preliminary). For 2014 information over planned tonnage was not included. The evaluation team does not have planned tonnage data for the year.

<sup>28</sup> Standard Project Report 2013 and 2014 (preliminary).

<b>PARTNERSHIPS: Food assistance interventions coordinated and partnerships developed and maintained</b>	Amount of complementary funds provided to the project by partners (including NGOs, INGOs, Civil Society, Private Sector organizations, International Financial Institutions, Regional development banks)		25		38
	Number of partner organizations that provide complementary inputs and services		100		75
	Proportion (%) of project activities implemented with the engagement of complementary partners		100		100
<sup>29</sup> <b>GENDER: Gender equality and empowerment improved</b>	Proportion (%) of households where females and males together make decisions over the use of cash, voucher or food		30		13
	Proportion (%) of households where females make decisions over the use of cash, voucher or food		70		86
	Proportion (%) of households where males make decisions over the use of cash, voucher or food		0		12
	Proportion (%) of women beneficiaries in leadership positions of project management committees		60		21
<b>OUTCOMES</b>					
<b>SO 1 - Save Lives and Protect Livelihoods in Emergencies</b>	Stabilized or improved food consumption over assistance period for targeted households and/or individual				
	Diet Diversity Score (female-headed households)		5.7		5.65
	Diet Diversity Score (male-headed households)		5.7		5.55
	FCS: percentage of households with acceptable Food Consumption Score (female-headed) <sup>30</sup>		80		18.15
	FCS: percentage of households with acceptable Food Consumption Score (male-headed)		80		42.75
	FCS: percentage of households with acceptable Food Consumption Score		80	76	
	FCS: percentage of households with borderline Food Consumption Score (female-headed) <sup>31</sup>				9.7
	FCS: percentage of households with borderline Food Consumption Score (male-headed)				18.4
	FCS: percentage of households with borderline Food Consumption Score			14	
	FCS: percentage of households with poor Food Consumption Score (female-headed) <sup>32</sup>		<20		1.55
	FCS: percentage of households with poor Food Consumption Score (male-headed)		<20		9.35

<sup>29</sup> Scores have been taken from SPR 2014. Values add up to 111 instead of 100.

<sup>30</sup> Percentages have been broken out between males and females. The combined percentage for acceptable FCS is 60.9%.

<sup>31</sup> Percentages have been broken out between males and females. The combined percentage for borderline FCS is 28.1%.

<sup>32</sup> Percentages have been broken out between males and females. The combined percentage for poor FCS is 10.9%.

	FCS: percentage of households with poor Food Consumption Score		<20	10	
	Stabilized or reduced undernutrition among children aged 6-59 months and pregnant and lactating women				
	Proportion (%) of eligible population who participate in programme (coverage)	0	70		20
	Proportion of target population who participate in an adequate number of distributions	0	66		25.7
SO 2 - Support or restore food security and nutrition and establish or rebuild livelihoods in fragile settings and following emergencies	Improved access to assets and basic services including community and market infrastructure				
	CAS: percentage of communities with an increased Asset Score	100	80	100	100
	Enrolment: Average annual rate of change in number of children enrolled in WFP-assisted primary schools		6		6.1
	Enrolment (boys): Average annual rate of change in number of boys enrolled in WFP-assisted primary schools		6		7.2
	Enrolment (girls): Average annual rate of change in number of girls enrolled in WFP-assisted primary schools		6		4.9
	Gender ratio: ratio of girls to boys enrolled in WFP-assisted primary schools	0.81	1	0.8	1
	Retention rate (boys) in WFP-assisted primary schools	94.5	85	95.5	97
	Retention rate (girls) in WFP-assisted primary schools	94.4	85	95.2	97
	Retention rate in WFP-assisted primary schools	94.5	85	94.5	97
	Stabilised or reduced undernutrition, including micronutrient deficiencies among children aged 6-59 months, pregnant and lactating women, and school-aged children				
	MAM treatment default rate (%) (PLWs and children under 5)	8	15		3
	MAM treatment mortality rate (%) (PLWs and children under 5)	3	0		0
	MAM treatment non-response rate (%) (PLWs and children under 5)	3	15		3
	MAM treatment recovery rate (%) (PLWs and children under 5)	92	75		92
	Prevalence of acute malnutrition among children under 5 (weight-for-height as %)	14.4		15.1	14.9
	Proportion of eligible population who participate in programme (coverage) (MCHN)		70		49.9
	Proportion of eligible population who participate in programme (coverage) (TSFP)		50		48.4
	Proportion of target population who participate in an adequate number of distributions		66		63
	TB Treatment Nutritional Recovery Rate (%)	79	75	79	90
	TB Treatment Default Rate (%)	1		2	
	TB Treatment Success Rate (%)	92		90	
	Capacity developed to address national food insecurity needs				

	NCI: National Capacity Index (Puntland)	0	1.6		0.3
	NCI: National Capacity Index (Somaliland)	0	1.6		0.45
<b>SO 3: Restore and rebuild lives and livelihoods in post-conflict, post-disaster or transition situations</b>	Improved access to livelihood assets has contributed to enhanced resilience and reduced risks from disaster and shocks faced by targeted food insecure communities and households				
	CAS: percentage of communities with an increased Asset Score	80	80	100	75
	CSI (Food): Percentage of households with reduced/stabilized Coping Strategy Index	48.4	100		43.7
	Diet Diversity Score (female-headed households)	4.4	5.7		5.7
	Diet Diversity Score (male-headed households)	4.0	5.7		6.0
	FCS: percentage of households with poor Food Consumption Score (male-headed)		<20		12.5

**Notes:**

Sources: SPR 2013 and SPR 2014 (preliminary).

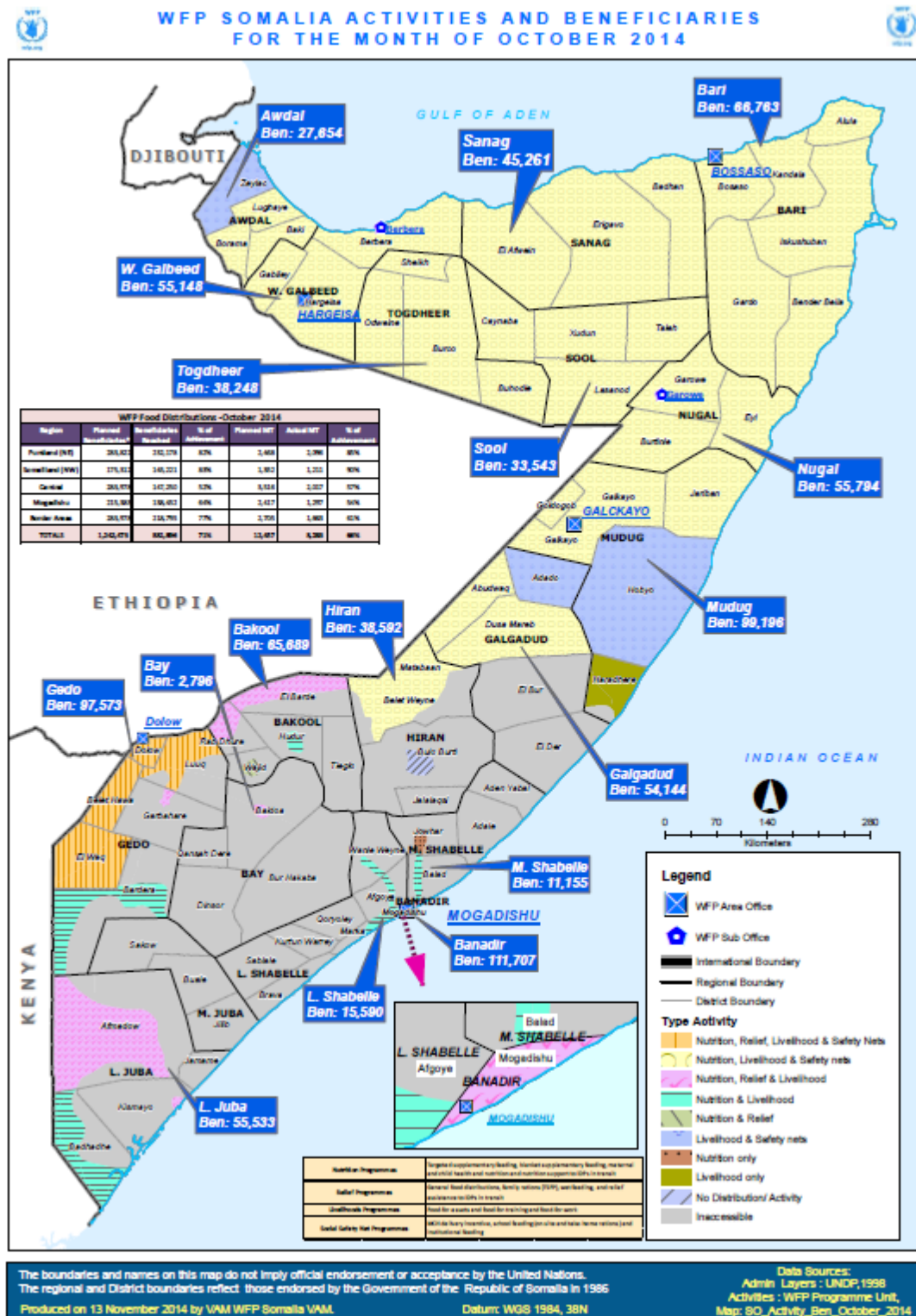
**Key**

Planned outcome attained
Planned outcome not attained
No data available
Not foreseen



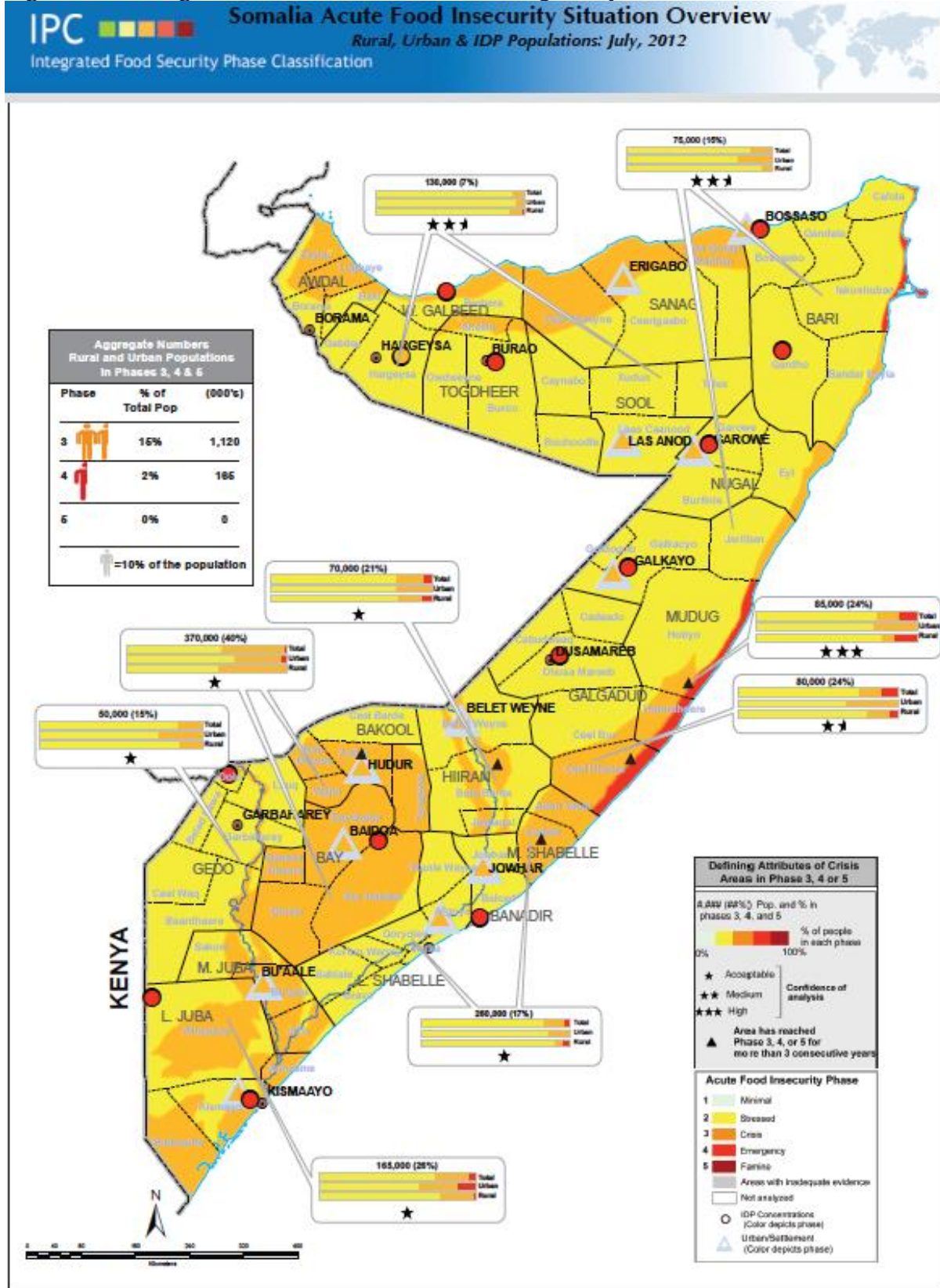
# Maps

## Figure 19: Map of WFP Somalia activities (October 2014)



Source: WFP Somalia Country Office

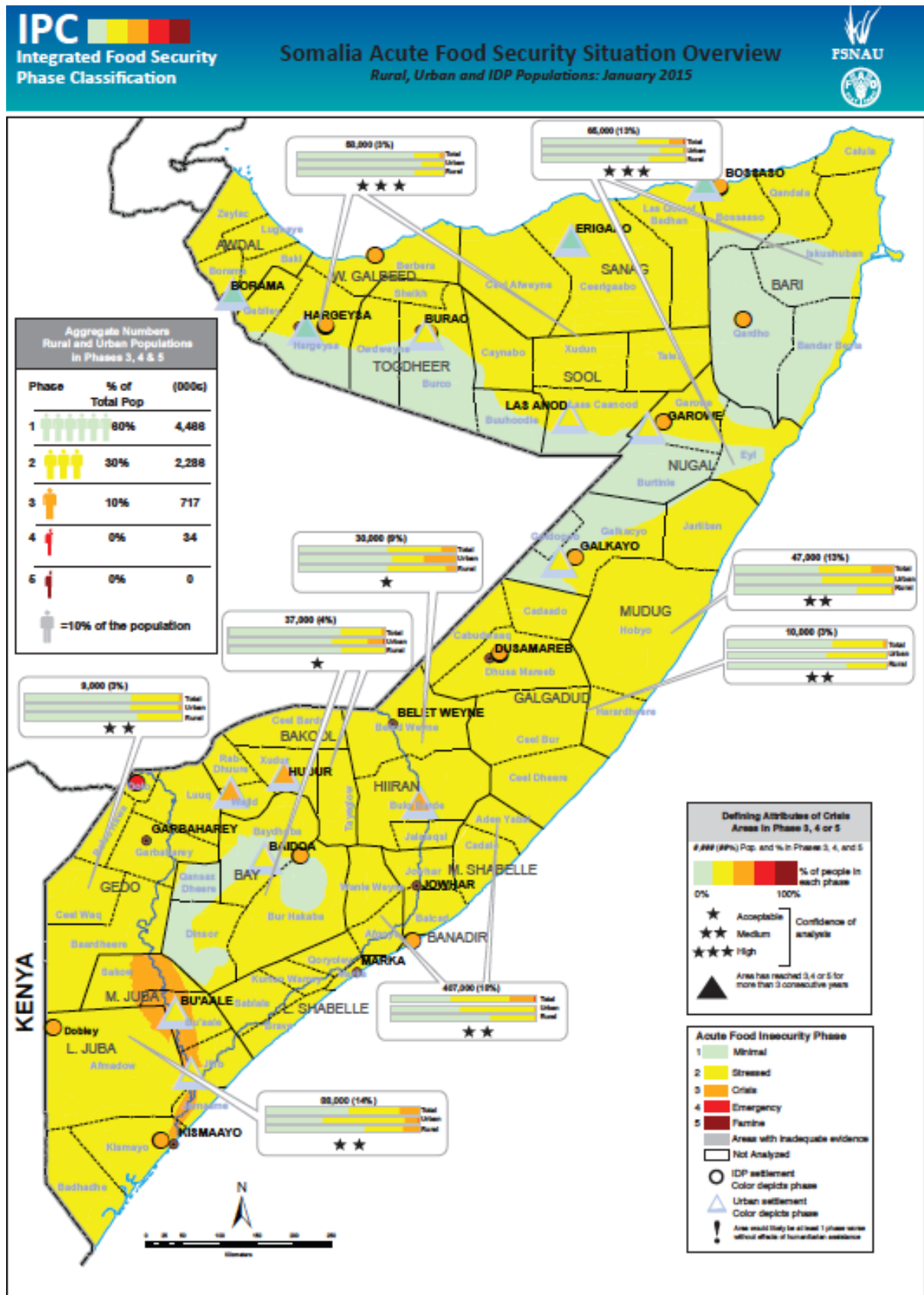
**Figure 20: Integrated Phase Classification Map (July 2012)**



Source: FSNAU (2012) <http://www.fsnau.org/ipc/ipc-map>



Figure 21: Integrated Phase Classification Map (January 2015)



Source: FSNAU (2015) <http://www.fsnau.org/ipc/ipc-map>

## Executive Summary

1. This evaluation of the World Food Programme (WFP) Somalia Protracted Relief and Recovery Operation (PRRO) 200443 covers the period from June 2012 until December 2014 and incorporates the operational activities undertaken from the launch of the operation in January 2013. The PRRO is due to finish in December 2015 and the evaluation has been timed so that its findings can feed into the design of the next PRRO planned to start in January 2016. The evaluation aims to provide feedback on the activities implemented and the results achieved, lessons learned and formulate recommendations in order to improve the operation implementation, and provide input for the future operations. The evaluation took place between November 2014 and April 2015. The main users of the evaluation are the WFP Country Office (CO), WFP Area Offices (AOs), WFP Regional Bureau (RB), the WFP Office of Evaluation (OEV), WFP partners (in particular FAO and UNICEF), as well as government authorities.
2. The evaluation was designed to answer three major areas: 1) appropriateness of the operation, 2) the observed results, and 3) how and why these results were attained. The scope of the evaluation included the design, performance, and results of all activities implemented under PRRO 200443. This covers nutrition and health activities: Targeted supplementary feeding programme (TSFP), Mother-and-child health and nutrition (MCHN) for pregnant or lactating women (PLW) and children 6-23 months, Human Immunodeficiency Virus/ Tuberculosis (HIV/TB) care and treatment and Blanket Supplementary Feeding (BSF). Moreover, the PRRO includes the provision of household rations and hot meal relief through General Food Distribution (family dry rations), or wet feeding (individual hot meals). School Feeding (school meals, take home rations for school girls) and livelihood activities (Cash/Voucher/Food for Asset/Training) are also included, as is an element of capacity development targeting local partner agencies, and government counterparts.
3. The Evaluation Team (ET) included five external international consultants and two Somali consultants. The team combined specialised expertise in nutrition, food security, livelihoods, resilience, gender and cash transfer programming.
4. The evaluation primarily used qualitative methods for primary data collection, including key informant interviews and focus group discussions. This was complemented with review of the project quantitative data and analysis of background documents. The ET visited four of the five Area Offices (AOs): Dolow, Hargeisa, Bossaso, Galkayo, as well as the sub-office in Garowe. The Mogadishu AO could not be visited due to security concerns but office staff were interviewed online. Thirty-two operational sites were visited for general observation and consultation with beneficiaries and other stakeholders.
5. Somalia is a low-income, food-deficit country with an estimated population of 12.3 million.<sup>33</sup> The population consists of 1.1 million internally displaced people (IDPs) (9%), 2.8 million rural (23%), 3.2 million nomads (26%), and 5.2 million urban (4.2%). It is estimated that an additional one million Somalis live as refugees in neighbouring countries and Yemen. Somalia is currently not ranked on the 2014 UNDP Human Development Index due to lack of data.<sup>34</sup> However, the most recent,

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<sup>33</sup> [http://countryoffice.unfpa.org/somalia/2013/03/12/6401/population\\_pess/](http://countryoffice.unfpa.org/somalia/2013/03/12/6401/population_pess/)

<sup>34</sup> UNDP (2014) Human Development Report 2014 - Sustaining Human Progress: Reducing Vulnerabilities and Building Resilience.

publically available data for the Multidimensional Poverty Index, shows that 82 percent of the population are poor while an additional 8 percent are near poverty.<sup>35</sup>

6. The scarcity of reliable and up-to-date data in Somalia is a real challenge for any operation. The existence of the Food Security and Nutrition Analysis Unit (FSNAU)<sup>36</sup> and the WFP Vulnerability Analysis and Mapping Unit (VAM) is therefore invaluable for providing seasonal food security and nutrition assessments, ad-hoc technical analysis, and thereby enabling the provision of relatively good baseline information. The WFP Trend Analysis 2007 to 2012<sup>37</sup> further supported the needs assessments for the PRRO and provided a good justification for the programme approach. As a result, the ET finds that the activities that were included in the PRRO were appropriate for the food security and nutrition context at the time of planning and design (mid-2012).
7. The design of the PRRO is coherent with relevant WFP corporate strategies and policies, including the Corporate Partnership Strategy, WFP Nutrition Policy,<sup>38</sup> the WFP School Feeding Policy,<sup>39</sup> and WFP corporate guidance on expanding the use of cash and vouchers for providing food assistance,<sup>40</sup> the Policy on Disaster Risk Reduction and Management, the 2009 Gender Policy, and the Capacity Development Policy. The original design was coherent with WFP's Strategic Plan 2008-2013. When the new WFP Strategic plan (2014-2017) was developed, WFP Somalia updated the operation's results framework to ensure continued coherence with corporate strategy.
8. In total, the PRRO planned to support 2.9 million beneficiaries. The overall objective is "to enhance resilience in communities and households affected by recurrent shocks, and to ensure that WFP can continue to save lives in emergencies and protect livelihoods". The PRRO has three operational objectives corresponding to the Strategic Objectives 1, 2, and 3 in WFP's Strategic Plans 2008-2013 and 2014-17:
  - Protect livelihoods during shocks and seasonal vulnerability through nutritional support and targeted relief, as appropriate,
  - Enhance the resilience of communities through food for assets and enhanced partnerships, and
  - Rebuild household food and nutrition security with preventive and therapeutic interventions, school meals and food for assets.
9. Overall, the PRRO is characterized by a flexible approach that incorporates both relief and recovery interventions, which is appropriate based on the different contexts in different locations and the volatility of food emergencies. The resilience approach is appropriate to strengthen the links between emergency and development and has improved coordination, alignment, and connectivity particularly in activities implemented within the Joint Resilience Strategy framework.
10. The nutrition activities have resulted in a number of positive outcomes. An increased focus on integrated approaches, including MCHN clinics, has increased the effectiveness of the nutrition activities through integrated prevention and treatment programming, including outreach. However, functional MCHN clinics only exist in

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<sup>35</sup> [http://hdr.undp.org/sites/all/themes/hdr\\_theme/country-notes/SOM.pdf](http://hdr.undp.org/sites/all/themes/hdr_theme/country-notes/SOM.pdf)

<sup>36</sup> More information on food security monitoring work by FSNAU and FEWSNET can be found in Annex 11.

<sup>37</sup> WFP Somalia VAM (2012) "Somalia: Trend Analysis of Food and Nutrition Insecurity (2007-2012)"

<sup>38</sup> WFP Nutrition Policy, 2012 WFP/EB.1/2012/5-A.

<sup>39</sup> WFP (2013) Revised School Feeding Policy: Promoting innovation to achieve national ownership.

<sup>40</sup> WFP (2008) Vouchers and cash transfers as food assistance instruments: opportunities and challenges.

Somaliland and Puntland so even if the measure is effective where implemented, it cannot be transferred to South Central Zone (SCZ) for the time being.

11. WFP has successfully improved mobilization, outreach and effective case finding and follow-up of moderately acute malnourished cases through its large network of community nutrition workers who have been trained under the PRRO. In nutrition this means a strong focus on addressing health and hygiene, care and feeding practices as the key determinants of acute malnutrition and stunting through effective interventions aimed to change practice. Whilst attention was given to this in the design and early stages of the PRRO, it has not been sufficiently followed through in practice. Still, since many of the community health and nutrition cadre are affiliated with the MCHN centre, this is a critical aspect of an integrated programming.
12. The GFD activity provided relief food and wet feeding assistance to households and communities facing food insecurity linked to drought and to food insecure IDPs and urban people. Project monitoring data however, shows that throughout the project more than 10 percent of households have poor food consumption scores despite being provided food assistance. This indicates a strong need for strengthening household and community resilience in order to limit the need for relief.
13. The inclusion of the wet feeding activity in SCZ in 2013 was appropriate, as it was based on recommendations of FSNAU assessments and studies<sup>41</sup> and rapid assessments carried out by WFP at the end of 2012.<sup>42</sup> Considering the continuous serious protection threats confronting displaced Somalis,<sup>43</sup> the ET finds use of wet feeding in urban areas in SCZ appropriate.
14. School feeding activities, including take home rations, provided a significant pull factor for children to attend school. However, there is insufficient documentation to provide evidence of educational outcomes. This needs to be addressed to ensure that the School Feeding activities are meeting their objectives.
15. While the design of the cash and voucher component was appropriate and based on sound assessment and analysis the implementation has not proceeded according to plan and the cash and voucher activities are yet to be fully realized. WFP planned to reach 578,000 beneficiaries with cash or voucher interventions by the end of the PRRO. To date, the actual figure is 79,322 beneficiaries (13.7% of planned).
16. The gender activities in the project have mainly consisted of targeting to promote women's opportunities including participation, training, and health activities. The operation has effectively targeted women and girls for most activities and improved the attention to sex-disaggregated data since 2014. While the Monitoring and Evaluation (M&E) framework does not include indicators on women's empowerment, anecdotal evidence collected during the evaluation suggests that these activities have allowed women to gain more control over their lives and strengthen self-reliance. Likewise, the targeting criteria applied in the PRRO have successfully increased the number of female participants in all activities. However, there is a lack of proper gender analysis in the different contexts in which the PRRO is being implemented to understand the specific

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<sup>41</sup> See for instance FSNAU (2013) "FSNAU Technical Series Report No. VI 49" Available at <http://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=6&ved=0CDoQFjAF&url=http%3A%2F%2Fwww.fsnau.org%2Fdownloads%2FFSNAU-Technical-Series-Report-Post-Deyr-2012-13-Nutrition-Analysis.pdf&ei=Qlj1VP6bMevVywOU-IKwCA&usg=AFQjCNEKRFyO29qNuspXaeveCnn1K3rjtA&sig2=aTQK4j34vSNEIh39sAailg&bvm=bv.87269000,d.bGQ>

<sup>42</sup> WFP Somalia (2012) "Rapid Emergency Food Security and Nutrition Assessment (R-EFSNA) in urban areas of Kismayo".

<sup>43</sup> See for instance Drumta, J. (2014) "Internal Displacement in Somalia" Brookings Institute, Washington D.C.

conditions faced by women and girls and gender relations in general as a basis for proper gender sensitive planning and implementation.

17. While the M&E system is well developed with a compliance-oriented M&E plan and Standard Operating Procedures (SOP) in line with WFP's corporate policy, staff reductions and staff turnovers have put some constraints on the effectiveness of the system.
18. Funding constraints and pipeline issues negatively impacted the efficiency and effectiveness of the operation, including increased time of recovery for malnourished children because of substitution of ready to use therapeutic foods with less effective corn-soy. Funding constraints also had a negative impact on the planned use of cash-based modalities. WFP have focused on voucher modalities, with which they were already experienced, but which provide less flexibility for beneficiaries, and have a higher administrative burden for WFP. There is a broad consensus among partners and donors that cash-based modalities are not only appropriate in much of Somalia, but can also be an effective and efficient way to implement a range of programme activities. Implementation through cash-based modalities rather than vouchers, would be more coherent with other actors in Somalia, and reflect the direction of the larger humanitarian community, including donors, in Somalia.
19. The recommendations of the evaluation are as follows:

**Recommendation 1:** WFP Somalia should prioritize, revise and streamline their nutrition and health programming for maximum effectiveness and efficiency according to the context and limited resources. Specifically, this evaluation has identified a number of nutrition and health activities that need to be discontinued, or modified.

**Recommendation 2:** WFP Somalia should collaborate with MoH, local health authorities and UN partners under the joint mandate and Joint Health and Nutrition Programme (JHNP) to consolidate and scale up integrated programming at the MCHN. Specifically, WFP should revise the key aspects of their programme to ensure that it is coherent with other agencies, and global best practice.

**Recommendation 3:** WFP Somalia should continue to provide food assistance to the most food insecure population groups based on food security assessments, but a greater emphasis should be placed on the use of alternative transfer modalities. GFD should continue as an option under the 'contingency activities' but defined with clear exit strategies. Wet feeding should continue in urban centres in the South but exit strategies should be developed.

**Recommendation 4:** In collaboration with FAO and UNICEF, WFP Somalia should continue to develop and implement appropriate community resilience livelihood approaches. The approach should not only focus on protecting livelihoods but on improving livelihood opportunities, increasing community capacity and building resilience at all levels. This should be coordinated with other resilience initiatives in Somalia, including SomRep and the Informal Humanitarian Donor Group (IHDG) working on resilience.

**Recommendation 5:** WFP Somalia should collaborate with UNICEF to ensure that School Feeding makes a contribution to educational outcomes. This includes assessments of enrolment, attendance and any other impact the activity makes to education in Somalia. The comparative advantage of the current take-home-rations compared to alternative measures for promoting girls' enrolment should form the

basis for the School Feeding activities in the next PRRO. Moreover, the school feeding component should include mechanisms to ensure that children from the most destitute household will be able to attend school.

**Recommendation 6:** WFP Somalia should address identified capacity gaps in a number of sectors including nutrition and health, the use of cash-based modalities, and gender analysis. The ET therefore recommends that WFP Somalia develop a comprehensive capacity development strategy. This strategy should be based on capacity needs assessments and with monitoring indicators showing the specific capacity aspects to be increased. The capacity development strategy should not only address government counterparts but increasingly identifying and integrating alternative community governance structures. Furthermore, the capacity development strategy should address WFP Somalia's internal capacity needs.

**Recommendation 7:** WFP Somalia, together with HQ, should develop a fundraising strategy to enable programming to be implemented as planned. The strategy should include focus on funds available for cash-based approaches to be more effectively utilized across multiple sectors.

**Recommendation 8:** WFP Somalia should continue using a flexible approach that links relief and recovery, while strengthening community resilience in the next PRRO. The overall country strategy should also be continuously updated to ensure continuous alignment with the New Deal Compact, and the strategies of other humanitarian and development agencies working in Somalia.

**Recommendation 9:** WFP Somalia should ensure further development of the M&E system to ensure greater attention to its usefulness for planning and management purposes. Indicators should be developed to support the strengthening of an integrated approach, as well as indicators allowing assessment of impacts of different implementation modalities such as livelihood activities implemented under the Joint Resilience Strategy. Moreover, the M&E system should develop compatible and easily accessible data bases to promote optimal use of monitoring and evaluation for planning and management purposes.

## 1. Introduction

### 1.1. Evaluation Features

20. This evaluation was commissioned by the World Food Programme (WFP) Office of Evaluation (OEV) to provide accountability and evidence for programme results and learning for future action. The Somalia Protracted Relief and Recovery Operation (PRRO) 200443 “*Strengthening Food and Nutrition Security and Enhancing Resilience*”<sup>44</sup> (2013-2015) was selected for evaluation by WFP’s Regional Bureau (RB) in Nairobi, in consultation with the Country Office (CO) and OEV, from a shortlist of operations prepared by OEV that meet the criteria of utility and risk.<sup>45</sup>
21. The Terms of Reference (TOR) (Annex 1) defines the evaluation scope to include all programme activities and processes relevant to answering the key evaluation questions: How appropriate is the operation? What are the results of the operation? And, why and how has the operation produced the observed results? To guide the evaluation, these questions have been incorporated into an evaluation matrix (Annex 2).
22. The evaluation covers the period from June to December 2012 (formulation of the operation), and January 2013 (beginning of the operation) until the start of the field mission of the evaluation in January 2015. This PRRO is the first major WFP relief and recovery operation after many years of emergency operations, so the learning component of the evaluation is of particular importance.

### Evaluation methodology

23. The Evaluation Team (ET) included five international consultants and two Somali nationals. The two Somali team members, one female and one male, ensured sensitivity to local cultures and traditions during data collection and analysis. The team combines specialised expertise in nutrition, food security, livelihoods, resilience, gender and cash and voucher programming. An evaluation manager provided support and quality assurance to the ET throughout the evaluation.
24. The timing of the evaluation from November 2014 to April 2015 allows for evaluation findings to feed into the formulation of a follow-up operation to the PRRO, which concludes in December 2015. The key primary stakeholders for the evaluation are the CO, the area offices (AOs), the RB, and the OEV. Secondary users include partners, in particular FAO and UNICEF, as well as government authorities. Direct external stakeholders include direct beneficiaries, the government, implementing/cooperating partners (CPs) and donors.<sup>46</sup> Annex 3 outlines stakeholders’ interest and involvement in the evaluation.
25. Based on the TOR, the evaluation methodology was further defined during the inception phase in collaboration with OEV, CO, and RB (Annex 4). It follows a conventional evaluation methodology using mixed methods and analysis tools for assessing the PRRO with regard to relevance, effectiveness and efficiency, impact, appropriateness, coherence, and sustainability and presents conclusions and recommendations. The mixed-methods approach for data collection and analysis combined primary qualitative

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<sup>44</sup> From this point forward, the ET refers to PRRO 200443 simply as the PRRO.

<sup>45</sup> The utility criteria looked both at the timeliness of the evaluation given the operation’s cycle and the coverage of recent/planned evaluations. The risk criteria was based on a classification and risk ranking of WFP COs taking into consideration a wide range of risk factors, including operational and external factors as well as COs’ internal control self-assessments.

<sup>46</sup> Page vi of the Operational Fact Sheet shows a list of PRRO partners who have a stake in the results.

data and secondary quantitative data. The ET used various tools for data collection, including review of secondary data, stakeholder interviews (both face-to-face and virtual), semi-structured individual and group interviews with beneficiaries and local leaders, and general observations.

26. Gender sensitivity was used throughout the evaluation to allow for the differential analysis of the outcomes achieved by men, women, boys and girls. Gender-disaggregated information was used where possible, and attention was given to ensure that both male and female representatives from the different stakeholder groups were interviewed. For some activities, such as mother and child nutrition activities, beneficiaries are specifically targeted by gender. For other activities separate group interviews with men and women were organized when appropriate. The interviews included sections related to gender roles and assessment of the gender sensitivity of the PRRO.
27. The ET visited four of the five AOs: Dolow, Hargeisa, Bossaso, Galkayo, as well as the sub-office in Garowe. The Mogadishu AO could not be visited for security concerns but office staff were interviewed online. Thirty-two operational sites were visited for general observations and consultation with beneficiaries and other stakeholders. Selection of visited operation sites was based on consultation with the CO and AOs, coverage of the main programming components, the size of operations, partners, accessibility, and logistic concerns.
28. The ET also consulted with multiple agencies and representatives including with WFP staff, beneficiaries, local government representatives, donors and other partners. The ET triangulated information from existing internal and external data sources and primary qualitative data collected during the evaluation mission to crosscheck and validate findings and make conclusions. The full list of key informants can be found in Annex 5.

### **Limitations of the evaluation**

29. A number of evaluability challenges were identified by the ET and validated during the inception phase, including a) insecurity and unstable contexts in much of the operation area limiting the representation of the collected data; b) the general lack of reliable and up-to-date data in the Somali context; c) the heterogeneity of the PRRO in space and focus areas, which challenged identification of general conclusions; and d) some indicators are informed by secondary data that are not specific for the PRRO beneficiaries, for instance data from FSNAU on prevalence of acute child malnutrition. Some of the expected challenges were confirmed during the evaluation, while others were mitigated by the evaluation methodology. Key mitigating measures include data triangulation; use of country wide contextual baselines, thematic baselines, and baselines at the individual operation level, and assessment of the quality of monitoring and evaluation in the operation. The ET also used secondary quantitative data rather than primary due to time and resource availability. See Annex 6 for further details of evaluability and mitigation measures.
30. The Cash and Voucher Advisor and the Data Analyst did not participate in the field mission but other team members collected the relevant data.
31. Another limitation of the evaluation was that the ET was unable to visit any sites for activities linked to PRRO support to people living with HIV/AIDS and Tuberculosis, due to time and security restrictions. The full list of AOs and the concrete operations visited are presented in Annex 7.



## 1.2. Country Context<sup>47</sup>

32. Somalia is a low-income, food-deficit country with an estimated population of 12.3 million.<sup>48</sup> The population consists of 1.1 million internally displaced people (IDPs) (9%), 2.8 million rural (23%), 3.2 million nomads (26%), and 5.2 million urban (4.2%). Within each of these four groups, the distribution among men and women is almost equal.<sup>49</sup> It is estimated that an additional one million Somalis live as refugees in neighbouring countries and Yemen.
33. Somalia is currently not ranked on the 2014 UNDP Human Development Index due to lack of data.<sup>50</sup> However, the most recent, publically available data for the Multidimensional Poverty Index, shows that 81.8 percent of the population are poor while an additional 8.3 percent are near poverty.<sup>51</sup>
34. Probably the most defining factor for Somalia's development status is the collapse of the government in January 1991 and the continuous unsuccessful attempts in restoring a functional national government. Closely linked to the continuous instability is the militant group Al-Shabaab. The group is fighting against the Federal Government and has targeted development and humanitarian organizations. Al-Shabaab currently maintains control of large parts of South Central Somalia. The current Federal Government of Somalia, headed by President Hassan Sheikh Mohamud was installed in September 2012.
35. Soon after the state collapse in 1991, northern clans declared the independent Republic of Somaliland.<sup>52</sup> While the international community does not officially recognize Somaliland, it has maintained a stable existence with elections and a reliable governance structure. East of Somaliland, the semi-autonomous state Puntland was established in 1998 with local elections and a state government. International agencies, including WFP, cooperate with state and local authorities in both Somaliland and Puntland. Compared to the rest of the country, Somaliland and Puntland have seen a more peaceful development and steady improvement in development indicators such as education, health, and basic services.
36. The result of the long period of instability in Somalia is the lack of fully functional national level public institutions and national level sector policies.<sup>53</sup> However, the Federal Government of Somalia and its international partners endorsed a New Deal Compact<sup>54</sup> in 2012, which laid out a roadmap for establishing local governance, introducing democratic elections, and fostering economic development in the Vision

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<sup>47</sup> Statistical information is characterized by a high level of uncertainty in Somalia, and data should be used with caution. This challenge was highlighted in a 2012 assessment conducted by UN agencies on the capacity of the statistical system in Somalia, which showed that statistical activities are uncoordinated, incoherent, incomplete and unpredictable.<sup>47</sup>

<sup>48</sup> [http://countryoffice.unfpa.org/somalia/2013/03/12/6401/population\\_pess/](http://countryoffice.unfpa.org/somalia/2013/03/12/6401/population_pess/)

<sup>49</sup> Somalia NGO Consortium (2014) "Population Estimation Survey 2014" Presentation of key results. Available at <http://somalianoconsortium.org/docs/key/33/2014/1412919285.pdf>

<sup>50</sup> UNDP (2014) Human Development Report 2014 - Sustaining Human Progress: Reducing Vulnerabilities and Building Resilience.

<sup>51</sup> [http://hdr.undp.org/sites/all/themes/hdr\\_theme/country-notes/SOM.pdf](http://hdr.undp.org/sites/all/themes/hdr_theme/country-notes/SOM.pdf)

<sup>52</sup> Somalia consists of three main zones with varied social, livelihood and economic structures: the North-west zone (NWZ), also known as Somaliland, comprising Woq Galbeed, Awdal, Togdheer and Sool/Sanaag regions, the North-east zone (NEZ) also known as Puntland comprising Bari and Nugal regions, and the South Central zone (SCZ) comprising Mudug, Galgadud, Hiran, Bakool, Bay, Shabelle, Juba and Gedo regions.

<sup>53</sup> There are some exceptions though such as the Health Sector Strategic Plan (2013-2016) developed with support from the international community. In Somaliland and Puntland various policies have been put in place such as the Somaliland National Development Plan (2012-2016), the Somaliland Education Sector Strategic Plan (2012-2016), and the Puntland Five-Year Development Plan (2014-2018).

<sup>54</sup> The concept of the New Deal Compacts was developed in the 2011 principles "New Deal for Engagement in Fragile States" agreed between OECD countries and a group of fragile and conflict-affected states to promote country-led and country-owned transitions out of fragility. The Somali New Deal Compact is the first to be implemented.

2016 outlining the necessary post-transition benchmarks.<sup>55</sup> The New Deal Compact consists of five Peace and State building Goals (PSGs) on legitimate and inclusive politics (PSG1), security (PSG2), justice (PSG3), economic foundations (PSG4), and revenue and services (PSG5).

37. Ecologically, Somalia consists mainly of dry savannah, suitable only for extensive pasturage and occasional cultivation. Most of the country's food crops are grown in the fertile region in the south with the largest sedentary population in the country. However, it is also one of Somalia's most insecure areas. Somalia faces major challenges from environmental degradation, climate change, and natural disasters, particularly droughts and flooding. Increasing water shortages and scarcity of land cause conflict among communities, and recurrent droughts and irregular rainfall negatively impact food security and livelihoods in general, and contributing to poverty.
38. Food security is an ongoing concern in Somalia. However, the food security situation has improved over the period of the PRRO (see Figures 20 & 21 in Map Section). The latest bulletin from FSNAU based on the 2014 Deyr assessment (October-December 2014), an estimated 751,000 people in Somalia were classified in food security emergency and crisis (IPC 4 and 3). The majority (74%) of these food insecure people were IDPs. Moreover, 2.2 million additional people are highly vulnerable to food insecurity (stressed, IPC 2).
39. The 2014 Global Nutrition Report<sup>56</sup> identifies Somalia as the country with the worst prognosis in regard to reaching the international goals of reducing child stunting. According to the report, over the 2005-2013 period the stunting rate increased by more than 6 percent annually. The Food Security and Nutrition Analysis Unit (FSNAU) indicated in 2013 that the national stunting rate was 23.2 percent.<sup>57</sup> However, post rainy-season and post-harvest surveys in 2013 and 2014 carried out by FSNAU show much lower stunting rates. Pockets of high stunting rates exceeding critical levels of 30 percent were found among specific groups in South Somalia and among IDPs where it is particularly high.<sup>58</sup> Determinants of acute malnutrition and stunting are strongly associated with low rates of exclusive breastfeeding (9%) and poor infant and young child feeding (IYCF) practice.<sup>59</sup> The majority of acutely malnourished children are located in South-Central Somalia (SCZ).
40. In terms of education, Somalia has one of the lowest national primary school enrolment rates in the world at around 31 percent (22% for girls and 34% for boys) with secondary school participation rates even lower (around 8% for girls and 12% for boys). Gender inequality is common in the education system. Many of the school environments are unsafe and lack adequate sanitation facilities.<sup>60</sup>
41. While there is a serious lack of data on the status of women and gender equality in Somalia, it is generally recognized that inequality is high. According to UNDP (2012), the gender inequality index for Somalia is 0.776<sup>61</sup> placing Somalia at the fourth highest

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<sup>55</sup> UNDP. UNDP Somalia Annual Report 2013.

<sup>56</sup> International Food Policy Research Institute (2014) "Global Nutrition Report 2014: Actions and Accountability to Accelerate the World's Progress on Nutrition", IFPRI, Washington, DC.

<sup>57</sup> FSNAU (2013) "Bi-Monthly Nutrition Update, March-April 2013" FSNAU, Nairobi.

<sup>58</sup> FSNAU Post Deyr 2013-14 Nutrition Technical Analysis Report. FSNAU, Nairobi.

<sup>59</sup> International Food Policy Research Institute (2014) "Global Nutrition Report 2014: Actions and Accountability to Accelerate the World's Progress on Nutrition", IFPRI, Washington, DC.

<sup>60</sup> UNICEF and Somalia Federal Republic. Go-2-School Initiative: Educating for Resilience (2013-2016) Strategy Document, [http://www.unicef.org/somalia/SOM\\_resources\\_gotoschool.pdf](http://www.unicef.org/somalia/SOM_resources_gotoschool.pdf).

<sup>61</sup> A score of 1 denotes complete inequality.

position globally.<sup>62</sup> The report also highlights the high amount of reported gender based violence (GBV), particularly prominent among IDP populations.<sup>63</sup>

42. The long absence of an effective government has led to a largely unregulated economy with substantial private sector development and widespread corruption and illicit activities, including piracy. Agriculture is the most important economic sector accounting for 65 percent of gross domestic product (GDP) and providing employment for 65 percent of the workforce. Livestock is the mainstay contributing 40 percent of GDP and more than 50 percent of export earnings.<sup>64</sup> The estimated per capita GDP was US\$284 in 2012 compared to US\$1,300 in Sub Saharan Africa on average.<sup>65</sup>
43. Remittances from the Somali diaspora contribute significantly to GDP, estimated at 25 to 40 percent in a 2013 Oxfam study. Estimates of the total amount of remittances vary from US\$1.2 billion annually<sup>66</sup> to US\$2.0 billion annually.<sup>67</sup> Remittances have played an important role in relief and development by helping to keep people alive and providing a foundation for economic recovery.<sup>68</sup> However, the industry has faced challenges with the withdrawal of western banks from money transfer services in Somalia. In households benefitting from remittances, they account for 60 percent of annual income.<sup>69</sup> Most remittances are paid through the extensive networks of money transfer operators, locally known as “*hawala*”. Since much of Somalia lacks a formal banking sector, the hawala agents have provided the necessary infrastructure for transferring money within the country, and more importantly, from abroad.
44. Likewise, the telecommunication sector has seen some positive development. There are wireless services in most major cities and telecommunication companies offer the lowest international call rates on the continent. The telecommunication sector provides new opportunities for the implementing cash transfer programmes through the mobile network. Some agencies are already conducting needs assessments and programme monitoring through mobile devices.

### 1.3. Operation Overview

45. The PRRO was approved in November 2012 for implementation from January 2013 to December 2015. The PRRO planned to support 2.9 million beneficiaries (2013: 1.56 million, 2014: 1.58 million; 2015: 1.61 million).
46. The overall objective is defined as “to enhance resilience in communities and households affected by recurrent shocks, and to ensure that WFP can continue to save lives in emergencies and protect livelihoods”. The PRRO has three operational objectives corresponding to the Strategic Objectives 1, 2, and 3 in WFP’s Strategic Plans 2008-2013 and 2014-17:

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<sup>62</sup> UNDP (2012) “Gender in Somalia”. Available at

<[www.undp.org/content/dam/rbas/doc/Women%27s%20Empowerment/Gender\\_Somalia.pdf](http://www.undp.org/content/dam/rbas/doc/Women%27s%20Empowerment/Gender_Somalia.pdf)>

<sup>63</sup> <http://www.globalprotectioncluster.org/en/field-support/field-protection-clusters/countries/somalia.html>

<sup>64</sup> CIA World Fact Book. Op. cit.

<sup>65</sup> Citing the Human Development Report 2012.

<sup>66</sup> FSNAU (2013) “Family Ties: Remittances and Livelihoods Support in Puntland and Somaliland” Food Security and Nutrition Analysis Unit – Somalia, Nairobi

<sup>67</sup> IMF Survey (2013) “IMF to Help Somalia Rebuild Its Economy” Available at

<<http://www.imf.org/external/pubs/ft/survey/so/2013/caro62413a.htm>>. Estimation based on IMF’s first health check on the Somali Economy in 22 years.

<sup>68</sup> Watkins, K. & M. Quattri (2014) “Lost in Intermediation – How Excessive Charges Undermine the Benefits of Remittances for Africa” Overseas Development Institute, London.

<sup>69</sup> Orozco, M & J. Yansura (2013) “Keeping the Lifeline Open – Remittances and Markets in Somalia” Oxfam America, Boston.

- Protect livelihoods during shocks and seasonal vulnerability through nutritional support and targeted relief, as appropriate,
  - Enhance the resilience of communities through food for assets and enhanced partnerships, and
  - Rebuild household food and nutrition security with preventive and therapeutic interventions, school meals and food for assets.
47. The PRRO includes activities covering a number of sectors, including nutrition and health, food security, livelihoods, education and gender.
48. Nutrition activities make up the largest component of the PRRO and include treatment of both chronic and acute malnutrition and activities to prevent people from becoming malnourished or sliding back to severe malnutrition:
- Targeted supplementary feeding programme (TSFP) for individuals aimed at treating mild-to-moderate acute malnutrition in children under 5, as well as pregnant and nursing women (PLW), as a preventative measure. The duration of treatment usually ranges between two and three months.
  - Mother-and-child health and nutrition (MCHN) for PLWs and children 6-23 months focus on the 1,000-day window of opportunity for impact.<sup>70</sup> Beneficiaries receive daily supplements of fortified food, regardless of their nutritional status. The programme is implemented through functional MCHN clinics where beneficiaries receive nutritional support and various health interventions. PLWs can stay in the programme until delivery and/or the child reaches 6 months, and children can remain in the programme until 24 months.
  - HIV/TB care and treatment is provided to individuals, and monthly household rations are provided to clients and their families through treatment centres.
  - Blanket supplementary feeding programme (BSFP) provides seasonal nutritional assistance to internally displaced (IDP) communities during lean periods between harvests when the traditional foods of milk and meat are in short supply and for IDP communities with extremely high GAM rates. All children under the age of 3 receive nutrient-dense, ready-to-use supplementary food. At times of acute need, children under 5 and PLW may also receive nutrition products.
49. The PRRO, furthermore, includes the provision of household rations and hot meal relief. This is done through General Food Distribution (GFD-family dry rations) for short periods of time, or wet feeding (individual hot meals) for IDPs in urban areas.
50. School Feeding (school meals and take home rations (THR) for school girls) and livelihood activities (FFA: Cash/Voucher/Food for Asset/Training) make up the remainder of the targeted beneficiary numbers. School feeding provides daily meals to all students and THR to the families of girls having attended at least 80 percent of school days. FFA is implemented in areas exposed to 1-3 years of Crisis and Emergency over the preceding 5 years, where security allows delivery and monitoring, and where partners have the capacity to deliver FFA interventions. The PRRO school feeding activities also includes an element of capacity development targeting local partner agencies, and government counterparts.

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<sup>70</sup> 1000-day window is from conception to age 24 months.

51. The PRRO was defined with differentiated activities for men and women and boys and girls, for instance support to increase girls' school attendance and support for pregnant and nursing women. In line with the transition from the Strategic Plan 2008-2013, to the plan of 2014-2017, more attention was given to gender sensitive approaches and gender-disaggregated data in the updated results framework prepared in compliance with the new Strategic Plan (see Annex 8 for further details).
52. The overall budget for the operation was US\$863 million. There have been two amendments/budget revisions (BR) since the launch of the PRRO.
- BR1 (approved May 2013) raised the budget to US\$ 917 million and reflected the increase in the costs for the Landside Transport, Storage and Handling rate from US\$ 307.86/mt to US\$425.07/mt.<sup>71</sup>
  - BR2 (approved July 2014) reduced the overall PRRO budget by US\$51.1 million to US\$866 million reflecting the improved food security situation. Moreover, with BR2 security costs were moved from the PRRO budget to a special operation, the capacity development costs were increased by 64 percent, and the cash and voucher costs were increased by 15 percent.<sup>72</sup> BR2 also decreased the planned number of beneficiaries by 15 percent for 2014. However, the total number of beneficiaries overall remained the same at 2.9 million, as there was an increase of 200,000 in the number of beneficiaries in 2013.
53. The PRRO has attracted funding from different sources with the main funding partners being USA (49%), UK (7%), Canada (6%), and Japan (4%). The remaining 27 percent of funding came from carryovers from previous operations (13%), multilateral funding (7%), and other donors (12%). By 31 December 2014, 40 percent of the appeal had been funded, which led to a shortfall of US\$516 million.
54. In addition to this PRRO, WFP Somalia is implementing three Special Operations (SO) that are critical for the operation of the PRRO: 1/ SO 200507 "Humanitarian Air Service in Support of Relief Operations in Somalia and Kenya" (Jan 2013 - Dec 2014), (funding requirements: US\$70.9 million; 75% funded); 2/ SO 200440 "Food Security Cluster Augmentation in Response to the Continued Humanitarian Situation in Somalia" (Sept 2012 - Dec 2015), (funding requirements: US\$5.8 million; 60% funded); and 3/SO 200637 "Security Augmentation in Support of WFP Operations in Somalia (Jun 2014 – May 2016), (funding requirements: US\$22.9 million).
55. Finally, it should be noted that WFP partners with UNHCR in support of the tripartite agreement signed between UNHCR and the governments of Kenya and Somalia for the voluntary repatriation of Somali refugees living in Kenya. WFP provides food rations as part of a package of assistance to returnees. WFP is an active member of the Return Consortium convened by UNHCR. A recent evaluation of WFP Kenya refugees operation found that for refugees, the camp situation provides a better alternative than the prospects of insecurity and conflict in their homeland, which could mean limited demand on the planned PRRO support to returning refugees, including support packages.<sup>73</sup>

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<sup>71</sup> Somalia PRRO 200443 BR1

<sup>72</sup> TOR and BR2 revised 24 April 2014

<sup>73</sup> Finan, Tim et al. (2014) "Operation Evaluation - Kenya, PRRO 200174, Food Assistance to Refugees: An Evaluation of WFP's Operation (2011-2013)" Office of Evaluation, World Food Programme, Rome.

## 2. Evaluation Findings

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### 2.1. Appropriateness of the Operation

56. The PRRO was formulated after the evaluation of WFP's country portfolio 2006-2011.<sup>74</sup> The evaluation concluded that WFP had demonstrated that it had the capacity to deliver emergency food aid efficiently. However, the evaluation found insufficient justification for transfer modalities and lack of sufficient understanding of the different contexts across the country. In addition, the evaluation found that WFP lacked accountability at local level and lacked appropriate contingency plans. Finally, the country portfolio evaluation identified a need for WFP Somalia to develop more effective capacity in viable state institutions concerned with disaster risk management and sector planning for education and health. Overall, the ET finds that the structure and content of the PRRO responds to key shortcomings and needs identified in the country portfolio evaluation.
57. Likewise, the 2006-2011 evaluation's key recommendations have been translated into appropriate PRRO activities including improved food security information systems, feasibility studies for cash and voucher transfer modalities, attention to underlying causes of malnutrition in harmony with other principal partners<sup>75</sup> and strengthening the capacity of government institutions for disaster risk management.

#### 2.1.1 Appropriateness of the PRRO activities

58. The scarcity of reliable and up-to-date data in Somalia is a real challenge for any operation. The existence of the FSNAU<sup>76</sup> and the WFP Vulnerability Analysis and Mapping Unit (VAM) is therefore invaluable for providing seasonal food security and nutrition assessments, and enabling the provision of relatively good baseline information. The WFP Trend Analysis 2007 to 2012<sup>77</sup> further supports the needs assessments for the PRRO and provides a good justification for the programme approach.
59. During the planning phase of the PRRO, the FSNAU Post Gu 2012 Nutrition analysis (October 2012)<sup>78</sup> showed an estimated 2.1 million people remained in acute food security crisis (IPC Phases 3 and 4). Considering that WFP is not the only agency intervening with food assistance in Somalia, the PRRO targeted number of 1.6 million beneficiaries annually in 2013 was appropriate, particularly considering the contingency and budget revision options, which have been used prudently. The ET finds the activity differentiated targeting appropriate according to geographic needs based on the 2007-2012 Trend Analysis.
60. Furthermore, the ET determines that the inclusion of a range of nutrition interventions was appropriate based on the 2012 context. The focus on integrated programming encompassing treatment and prevention through the MCHN centres and outreach satellite modalities has allowed for integrated programming in Somaliland and Puntland. The TSFP activities were appropriately located in all areas where WFP is

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<sup>74</sup> Nicholson, Nigel et al. (2012) "Somalia: An Evaluation of WFP's Portfolio Vol. I - Full Report" Office of Evaluation, World Food Programme, Rome.

<sup>75</sup> Including FAO, IFAD, ILO, and UNICEF

<sup>76</sup> More information on food security monitoring work by FSNAU and FEWSNET can be found in Annex 11.

<sup>77</sup> WFP Somalia VAM (2012) "Somalia: Trend Analysis of Food and Nutrition Insecurity (2007-2012)"

<sup>78</sup> <http://www.fsnau.org/downloads/fsnau-technical-series-report-post-gu-2012-nutrition-analysis>.

intervening. Indicators of coverage and minimum acceptable diet have been appropriately incorporated into programme monitoring in accordance with the WFP new strategic framework<sup>79</sup> and an impact assessment of MCHN is appropriately part of the design and planned for 2015 and should aim to capture thus far unreported results.

61. The use of ready to use supplementary food (Plumpy'Sup) for children with MAM and acutely malnourished PLHIV is appropriate and in accordance with WFP policy to provide fortified, cost effective specialized nutrition products.<sup>80</sup> However, use of Corn Soy Blend plus (CSB+)<sup>81</sup> and vegetable oil intended as a substitution ration of last resort for MAM cases can be problematic. It hampers programme efficiency and effectiveness and reflects insufficient prioritization of nutrition objectives.
62. In light of the continuous pockets of food insecurity and severe acute malnutrition in SCZ and reflecting the flexibility of the PRRO design, the PRRO maintained an option for targeted relief food assistance when needed, including TSFP and wet feeding.<sup>82</sup> This is in line with the differentiated and scalable PRRO approach and fully appropriate in the volatile humanitarian context of Somalia.
63. There are different opinions among key actors in Somalia regarding the appropriateness of wet feeding in the post 2011 famine context in Somalia. Some donors find that wet feeding should only be used for life-saving interventions in severe food insecure conditions. However, the ET determines that it was appropriate to include wet feeding in SCZ in 2013, as it was based on recommendations of FSNAU assessments and studies<sup>83</sup> and rapid assessments carried out by WFP at the end of 2012.<sup>84</sup>
64. Considering the continuous serious protection threats confronting displaced Somalis, including by self-appointed gatekeepers who charge fees for the right to live in IDP settlements and receive relief distributions, and gender-based violence, the ET also finds use of wet feeding in urban areas in SCZ appropriate<sup>85</sup>. The modality is further justified by the frequent reports of violent incidents against humanitarian agencies in both Kismayo and Mogadishu.<sup>86</sup> From an efficiency point of view, use of wet feeding is also justified by the reduced use of firewood and the challenge of clean water. The ET noted, for instance, that during a severe water shortage in the Mogadishu area in 2014, the wet feeding activities continued with a clear positive impact on the 85,000 beneficiaries.
65. The logic of the PRRO to move from relief towards recovery assistance and targeted interventions implies that general food distributions will be focused only on areas where food insecurity remains at emergency levels and/or where access concerns remain high. Combined with the flexibility in the design of the PRRO, the capacity to respond to critical food insecurity needs in the form of relief for targeted households and locations when required is appropriate.
66. The ET considers that the livelihood component of the PRRO is also appropriate as it promotes recovery, and builds household and community resilience. Activity selection

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<sup>79</sup> WFP Draft Strategic Results Framework 2014-2017, September 10, 2013.

<sup>80</sup> WFP Nutrition Policy 2012.

<sup>81</sup> CSB+ is a Corn Soy Blend that has been enhanced with additional or elevated levels of micronutrients (vitamins B6, D, E and K, iron, iodine, calcium, potassium and phosphorus).

<sup>82</sup> In the project document, FFA is introduced as a relief activity where required technical skills are limited.

<sup>83</sup> See for instance FSNAU (2013) "FSNAU Technical Series Report No. VI 49" Available at <<http://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=6&ved=0CDoQFjAF&url=http%3A%2F%2Fwww.fsnau.org%2Fdownloads%2FFSNAU-Technical-Series-Report-Post-Deyr-2012-13-Nutrition-Analysis.pdf&ei=Qlj1VP6bMevVywOU-IKwCA&usg=AFQjCNEKRFyO29qNuspXaeveCnn1K3rjtA&sig2=aTQK4j34vSNEIh39sAailg&bvm=bv.87269000,d.bGQ>>

<sup>84</sup> WFP Somalia (2012) "Rapid Emergency Food Security and Nutrition Assessment (R-EFSNA) in urban areas of Kismayo"

<sup>85</sup> See for instance Drumta, J. (2014) "Internal Displacement in Somalia" Brookings Institute, Washington D.C.

<sup>86</sup> Monthly Humanitarian Bulletins (OCHA). The monthly bulletins are available at <<http://www.unocha.org/somalia/reports-media/ocha-reports/humanitarian-bulletins>>

under the FFA/FFT activities was guided by WFP Strategic Objectives, the infrastructure and capacities of the local area offices, and the activities of other humanitarian organisations in the area.

67. In the needs prioritisation stage, communities ranked their most pressing needs and identified needs which when addressed would achieve the most benefit for the most people. Almost 300 community consultations were carried out in Somalia in 2013 as a prerequisite for the implementation of asset creating activities. In 2014 community consultations were made mandatory for all WFP livelihood activities. Overall, the consultative processes ensured a certain level of appropriateness of the activities and strengthened a sense of community ownership. There were, however, instances where the activity selection should have been better guided.<sup>87</sup> This notwithstanding, the ET found WFP's livelihood enhancing activities to be appropriate.
68. School Feeding was also appropriately included in the PRRO based on UNICEF's Primary School Survey in Somalia 2006–2007, and more than a decade of WFP experience. Through the daily school meals, it was expected that the enrolment and retention rates of boys and girls would increase, contributing to the education outcome and greater learning capacity through improved nutrition status. Moreover, through targeting girls for monthly take-home-rations based on their attendance, the activity should contribute to gender equality by transferring resources to households and averting negative coping strategies that include denial of girls of education opportunities through engagement in domestic activities and early marriage. The expected enrolment and retention results were further supported by targeted awareness creation for parents on the importance of schooling for both boys and girls. The provision of technical assistance to female and male government/national partner staff was set to increase the capacity development and provide for an exit strategy.
69. The PRRO also included a component of capacity development for local authorities and partners. This was appropriate, based on the findings of the 2011 WFP Evaluation.<sup>88</sup> WFP develops capacities in the Ministry of Health, and the Ministry of Education in Somaliland and Puntland through training, funding for posts, monitoring missions and technical expertise, and by provision of equipment, which the ET considers fully appropriate. Moreover, by signing special implementation agreements with ministries, the ET considers that the PRRO strengthens the capacity development objective related to strategy development, planning, and oversight. However, considering the importance of building local capacity throughout Somalia, the ET considers that alternative measures for local capacity development, for instance through local organizations, are not sufficiently developed in the PRRO.

### **2.1.2 Appropriateness of the transfer modalities**

70. The NGO community has successfully implemented cash-based transfers in Somalia since 2001,<sup>89</sup> with positive impacts for the beneficiaries as well as positive multiplier effects for the local economy. This experience was widely applied in 2010–2012 in

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<sup>87</sup> A mission to Balade<sup>87</sup> discovered that an FFA dam construction had little direct impact on its intended IDP beneficiaries. The IDPs had little if any access to farming land and the real beneficiaries of the dam construction were the farmers within the host community. As the consultative method of participation leaves the final decision making to WFP, a more thorough assessment of the communities' and CPs' choice of project could have prevented this problem.

<sup>88</sup> Nicholson, Nigel et al. (2012) "Somalia: An Evaluation of WFP's Portfolio Vol. I - Full Report" Office of Evaluation, World Food Programme, Rome.

<sup>89</sup> Examples include: Acacia Consultants (2004) Evaluation of the cash relief programme implemented by Horn Relief. Commissioned by NOVIB/Oxfam Netherlands; Majid, N & Hussein, I (2007) Evaluation of the Cash Consortium in Southern Somalia. Oxfam GB and Horn Relief with AFREC, Development Concern and WASDA.



response to the famine in SCZ. Cash-based programmes were the single largest type of humanitarian assistance to SCZ in 2011–12 totalling nearly US\$470 million.<sup>90</sup>

71. The current PRRO project document specifies food as the primary transfer modality, identifying it as the most cost-effective and appropriate option in areas with low market functionality or for programme objectives, such as improved nutrition, best met with this modality. The project document correctly recognizes that cash and vouchers are appropriate only when the market is functioning. WFP initially planned to scale up the use of cash and vouchers to reach 13 percent of total beneficiaries by the end of the PRRO. At the start of the PRRO, WFP had already identified 18 districts, primarily in the north, where vouchers or cash transfers are more appropriate than in-kind assistance because the market was functioning and able to supply the requirements of the population.
72. Compared to the NGO community, WFP Somalia has limited experience in supporting market-based interventions. Since 2012 WFP has been providing value-based bar-coded paper vouchers to beneficiaries in Somaliland (Hargeisa). Although a number of challenges were identified with the approach, the impact on the beneficiaries and local traders has been positive. Lessons learned from the Somaliland voucher experience were considered in the design of the PRRO, which is the first WFP PRRO in Somalia that has included the use of cash and vouchers as a transfer modality.
73. Overall, the incorporation of cash and vouchers into the PRRO design was appropriate, based on the success of the WFP small pilot voucher programme in Somaliland in 2012, and the success of other cash-based programmes in Somalia implemented by the NGO community. However, by the time of the evaluation, no cash transfers had been made and only limited assistance was provided through vouchers.
74. The vouchers allow households to purchase food items from selected local traders, and are divided into three denominations to enable beneficiaries to purchase from multiple traders if they choose. Beneficiaries are told that they can purchase any food item they prefer, however the following items cannot be purchased: (i) any non-food commodities, (ii) sugar, (iii) any biscuits or other confectionary products, (iv) powdered milk and sodas, (v) *khat*, alcohol, and tobacco.
75. Restricting spending on non-food items and drugs such as *khat* or alcohol, is appropriate given the food security objective of the programme. However, the ET questions restricting beneficiaries choice of food items considering that one of the success factors of the cash and voucher experience in Somalia has been the increased beneficiary choice and flexibility of purchase. Still, the ET recognizes the lack of comparative impact evidence for the different choice modalities in different stages of the relief-recovery complex.
76. In addition, WFP planned that the cash and voucher values would be equivalent to the in-kind ration. This is appropriate given the food security objectives of the PRRO.
77. Finally, it should be noted that donors have an important influence over modality selection. Firstly, the bulk of donations are in-kind assistance and this availability had a bearing on the modality that was adopted. Secondly, some donors expressed preference for particular modalities, based either on market or security concerns, or concerns

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<sup>90</sup> Other nearly 30 NGOs implemented cash-based programmes, including Islamic Relief Committee, Veterinarians' Sans Frontiers (Germany), Adeso, ACF, COOPI, Save the Children, Catholic Relief Services, United Nations Development Programme, Norwegian Church Aid, Solidarités, Mercy Corps, International Labour Organisation, CARE Somalia, Relief International, International Organisation for Migration, and numerous Somali NGOs.

regarding WFP's limited experience in cash-based responses in different parts of Somalia.

### **2.1.3 Appropriateness of the gender considerations**

78. FSNAU documents and other studies and assessments on food security in Somalia have highlighted the gender gaps particularly disadvantaging girls and women for access and control to income and opportunities in general. However, many of the studies have also shown the great variability and the dynamic aspects of gender roles.<sup>91</sup> It is generally recognized within the PRRO Project Document that all activities should be gender sensitive. However, there have not been any specific gender studies to show the underlying factors of the existing power structures and the impacts on the efficiency and effectiveness of the PRRO and on food security in general. Likewise, the exact meaning of gender within the PRRO remains unclear. Most, if not all discussions about gender refer to the role of women and more often than not to quantitative issues, for instance how many women versus men participate in PRRO activities with little attention to the fact that gender is about equal opportunities for men and women and girls and boys and should not be seen as a 50:50 issue.
79. Information from the Protection Cluster indicates that the “incidence of sexual and gender-based violence has increased”. The 2012 Annual Report from the Protection cluster reports that GBV remains one of the greatest protection concerns in Somalia, particularly for IDP girls, adolescents, and women. The problem is particularly prominent among IDP populations and should therefore be considered during all activity design, especially when targeting IDPs.
80. Still, based on interviews and assessments the ET considers that the activity range, including specific PRRO activities that in principle should empower women, such as school take home rations for girls based on attendance and MCHN, are appropriate. However, because of the lack of gender studies the ET cannot confirm if the gender specific PRRO activities are appropriate in all regions where the PRRO is implemented. As such, the ET finds that the gender considerations and strategy for gender sensitive approaches in the PRRO lack a differentiated and evidence-based approach.

### **2.1.4 Coherence with WFP Corporate Strategy**

81. The MCHN component of the PRRO is coherent with the WFP Nutrition Policy<sup>92</sup> and the global initiative Scale up Nutrition (SUN).<sup>93</sup> The use of ready to use food (Plumpy'doz) for prevention of acute malnutrition among children aged 6-36 months is also coherent with WFP corporate policy.<sup>94</sup>
82. The school feeding activities of the PRRO align with the WFP School Feeding Policy<sup>95</sup> in terms of their support to beneficiaries and national capacity development, including increased household income and food availability, enhanced learning ability and access

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<sup>91</sup> See for instance FSNAU (2012) “Post Gu 2012 Nutrition Analysis” Available at < <http://www.fsnau.org/downloads/fsnau-post-gu-2012-analysis-presentation>.

<sup>92</sup> WFP Nutrition Policy, 2012 WFP/EB. 1/2012/5-A.

<sup>93</sup> Scale up Nutrition (SUN) focuses on the 1,000 days approach from pregnancy to 24 months. Somalia joined the SUN movement in May 2014.

<sup>94</sup> WFP Nutrition Policy 2012.

<sup>95</sup> WFP (2013) Revised School Feeding Policy: Promoting innovation to achieve national ownership.

to the education system, enhancement of children's nutrition, and strengthened national capacity through provision of technical assistance and policy support.

83. Likewise, the inclusion of cash-based transfer modalities for a number of activities is coherent with WFP corporate guidance on expanding the use of cash and vouchers for providing food assistance.<sup>96</sup>
84. The PRRO was also originally formulated with a results framework consistent with WFP's Strategic Plan 2008-2013. In light of the new Strategic Plan 2014-2017 the operation's results framework was updated to ensure continued coherence with the corporate strategy. The major changes include:
- Results for gender equality, partnerships, and protection now feature under a specific category as 'cross-cutting' issues, thus highlighting these underlying principles in all activities in the PRRO,
  - Pregnant and lactating women are included explicitly in Strategic Objective 1, and
  - With the changes of Strategic Objective 2 from a disaster risk management focus to strengthening livelihoods, the results focus on resilience, stabilization and improved access to basic services, and capacity development. This stresses the overall resilience objective of the PRRO and is further developed in the results of the new Strategic Objective 3.
85. The PRRO does not contribute to the corporate Strategic Objective 4. However, it does contribute to the resilience objective, including strengthening of local markets through cash and vouchers, increased school enrollment, and livelihood strengthening. A summary of the original and updated results framework is presented in Annex 8.
86. As mentioned earlier, gender has justifiably been highlighted as a separate and crosscutting area in the new Strategic Framework. The four corporate performance indicators, though, do not necessarily reflect the nuanced aspect of gender sensitive programming and implementation and might in some cases even provide misleading information. The first performance indicator is the proportion of women in leadership positions of project management committees with a target of 50 percent or above. On the one hand this indicator might show the opportunities provided to women. On the other hand it easily becomes a meaningless quota instead of a gender transformative measure. The third gender performance indicator refers to the proportion of women, men or both women and men, who make decisions over the use of cash, vouchers or food within the household. While this indicator might provide some information about the empowerment of women, it does not necessarily take into account the de facto gender of the heads of households.

### **2.1.5 Coherence and coordination with other actors**

87. Nutrition prevention and treatment programmes were designed appropriately in line with the National Nutrition Strategy.<sup>97</sup> In accordance with the global mandate to treat moderate acute malnutrition (MAM), WFP targets children aged 6-59 months and acutely malnourished PLWs in targeted supplementary feeding programmes (TSFP) using the Integrated Management of Acute Malnutrition (IMAM) approach. The type of approach and selection criteria is appropriate, relevant and in accordance with current

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<sup>96</sup> WFP (2008) Vouchers and cash transfers as food assistance instruments: opportunities and challenges.

<sup>97</sup> National Nutrition Strategy 2011-2013 WHO/UNICEF/WFP/FAO/FSNAU.

national policy.<sup>98</sup> MCHN and IMAM programming is also in line with Somalia Health Sector Strategic Plans 2013-2016.<sup>99</sup>

88. WFP's nutrition treatment and prevention interventions are also well aligned with the Joint Health and Nutrition Program Essential Package of Health Services<sup>100</sup> and support progress towards MDG 4 and 5. Addressing the key determinants of acute malnutrition and stunting through community based behavioural change through an effective package of health and nutrition specific prevention actions is in line with the Essential Package of Health Services (EPHS) and the National Infant and Young Child Feeding (IYCF) strategy.<sup>101</sup> Whilst WFP has given considerable attention to training and deploying outreach workers resulting in successful case finding and referral, less attention has been given to achieving behavioural change in practice and alignment of the community cadre with government and partner strategic plans.<sup>102</sup>
89. The school feeding activities of the PRRO are coherent with the GO2School campaign of the Ministry of Education (MOE) and UNICEF. The MOE was engaged significantly in the identification of schools to benefit, monitoring and supervision. Moreover, WFP has supported the development of school feeding units in Somaliland and Puntland in alignment with the Somaliland Education Sector Strategic Plan (2012-2016) and Puntland Education Sector Plan (2012-2016), which have as objectives to continue THR for girls, expand school feeding in primary schools, and improve girls' enrolment rate through school feeding.
90. WFP also collaborates with FAO and UNICEF to implement their 'Joint Resilience Strategy'.<sup>103</sup> This is based on the recognition that an effective resilience approach needs to be holistic. The initiative builds on the complementarity of the three agencies around its three pillars: enhanced production, safety nets, and basic services. As an approach, the resilience strategy builds on the existing activity portfolio of the three agencies with a focus on at risk households. The agencies recognized that the approach needed to be further developed and 2013 was used for development of guidelines and a common results framework as well as identification of pilot activities including seasonal and sequenced programming in different livelihood zones. Considering the limited knowledge and understanding of effective resilience approaches in Somalia, the ET considers the process of working through pilots in different livelihood zones as appropriate. However, the meaning of piloting has not been clarified sufficiently for different stakeholders who expect concrete productive outputs rather than learning.
91. The ET finds the approach based on partnerships and a holistic approach highly appropriate. Resilience enhancement is critical for vulnerable households in Somalia, and this collaboration is central to the future work of the UN.
92. Within the framework of the New Deal for Somalia and the associated Somali Compact, WFP participates in the PSG4 working group (PSG4: Economic Foundations' for sustainable long-term growth and poverty reduction) and co-lead the working group on

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<sup>98</sup> Somalia Guidelines for the Management of Acute Malnutrition, UNICEF/ IASC 2010.

<sup>99</sup> Somalia Health Sector Strategy Plan (HSSP) 2013-2016. Republic of Somalia. Ministry of Human Development and Public Services: Directorate of Health. Puntland HSSP 2013-2016 Somaliland HSSP 2013-2016. [www.jnhp.org](http://www.jnhp.org).

<sup>100</sup> The Somali Joint Health and Nutrition Programme (JHNP 2012-16) is a comprehensive multi-donor, multi-partner five-year development programme aimed towards helping Somalia meet its Millennium Development Goal (MDG) commitments on Maternal and Child health.

<sup>101</sup> National IYCF Strategy for Somaliland 2012-2016; IYCF Strategy and Action Plan for SCZ Somalia 2013-2017. [www.jnhp.org](http://www.jnhp.org)

<sup>102</sup> Communication for Behavior Change Strategy for WFP Interventions under PRRO 200443. WFP Somalia, June 10, 2013. Puntland Strategic Plan for Community Health Cadre (in draft 2015). WHO Plan of Action for Community Health Workers (in development). These plans aim to define the TORs, specific role and standard package of services for the numerous community cadre.

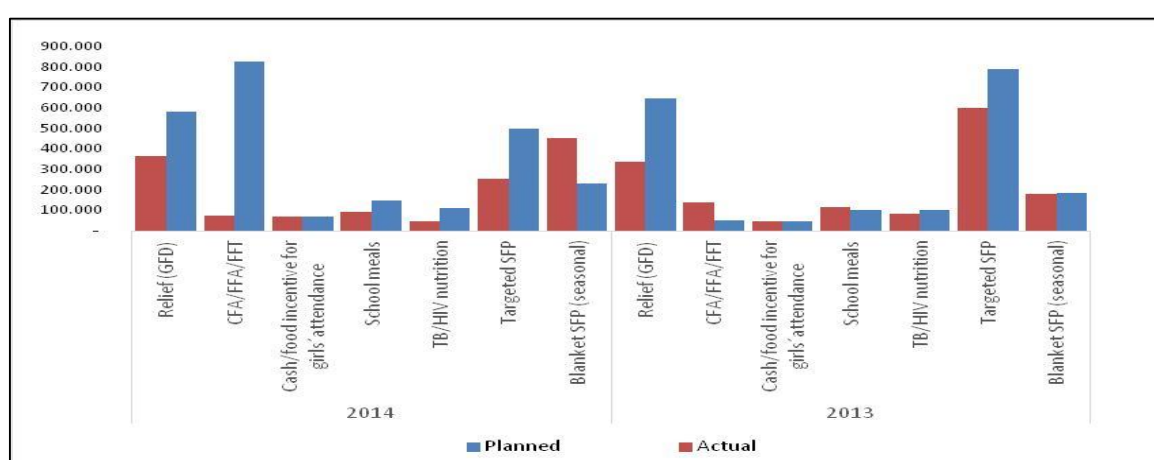
<sup>103</sup> <http://resilienceinsomalia.org/>

PSG5 (Revenues and Services). Overall, the PRRO is coherent with the goals of building economic foundations and increasing the availability and improving the quality of basic services.<sup>104</sup>

## 2.2. Results of the Operation

93. The activities implemented under PRRO 200443 have contributed to the achievement of the operation’s objectives. Over a period of 24 months, more than 3.3 million beneficiaries have been supported, more than 50% of which were women.<sup>105</sup> The flexibility of the PRRO has allowed WFP to address a very dynamic and highly unpredictable food insecurity situation with large geographic differences and a relatively low funding level.]

**Figure 22: Planned vs. actual PRRO beneficiaries by activity**



Source: 2013 SPR and 2014 SPR (preliminary)

### 2.2.1 Nutrition

94. The number of operational sites with nutrition activities was scaled up in 2013 and then down again in 2014 as shown in Figure 23 in response to the improved food security situation but also as a consequence of funding constraints. In addition to staff cutbacks this also led to a reduction in nutrition CPs from 70 in 2013 to 41 in 2014. This had the beneficial repercussion of streamlining field level agreements (FLAs)<sup>106</sup> with fewer partners. However, the scaling down has affected programme coverage in TSFP largely by reducing the number of mobile sites from a peak of 1,018 in 2013 (exceeding planned sites) to 741 at the end of 2014. The significant scale up of BSFP programme sites in 2014 was in direct response to critical GAM levels in SCZ. MCHN programming has been progressively scaled up to 81 sites in functional MCHN facilities in Somaliland and 65 in Puntland with three pilot sites in SCZ, for a total of 151 sites. HIV and TB treatment programming has remained small scale with 4 sites for PLHIV on antiretroviral treatment and 22 sites for TB patients on DOTS.

<sup>104</sup> Peace and state-building goals 4 & 5.

<sup>105</sup> 55% women beneficiaries in 2013, and 52% in 2014. (See Annex 12, Table 7).

<sup>106</sup> Field Level Agreements are mandates between WFP and Cooperating Partners stipulating conditions (incl. Plan of operation, project proposals and budget) for transfer WFP resources to the partner.

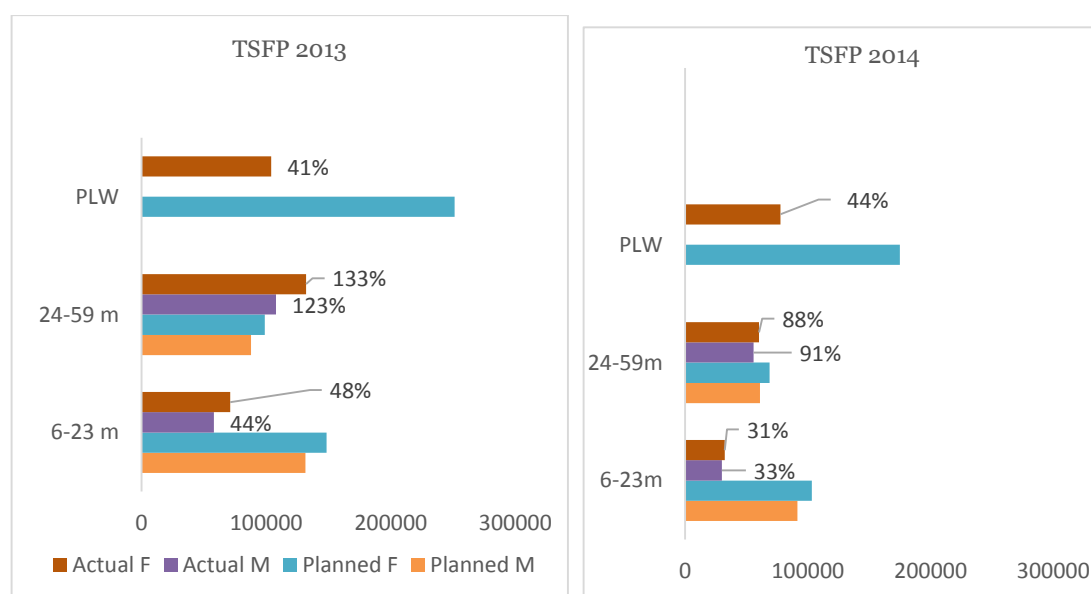
**Figure 23: Nutrition Intervention Sites by Modality 2012-2014**



Source: WFP Somalia Nutrition Unit database 2012 - 2103

95. The large scale treatment of MAM through TSFP in all zones has enabled WFP to reach 369,269 children aged 6-59 months in 2013 and 178,704 in 2014 as shown in Figure 24. Beneficiary enrolment and receipt of ration is not necessarily synonymous with children treated.<sup>107</sup> However, the good outcomes (noted below) suggest that the majority of MAM beneficiaries' enrolled are treated.

**Figure 24: TSFP - Planned and Actual Beneficiaries: 2013- 2014**



Source: SPR 2013 and 2014. WFP Somalia Nutrition Unit database

96. The 'underperformance' against planned for children aged 6-23 months in 2013 and 2104 appears counterintuitive as the majority of the caseload are children under 24 months.<sup>108</sup> Analysis of site registers and discussions with staff revealed that caseload size has decreased significantly in Somaliland and Puntland in 2014. This corresponds with the good coverage of the MCHN intervention in these areas and the active early case findings. Caseload in SCZ remains high therefore the reduced caseload is in fact a good outcome. The large number of older children against planned is likely due in part to the use of weight for height (WFHZ) in admissions according to the existing protocol leading

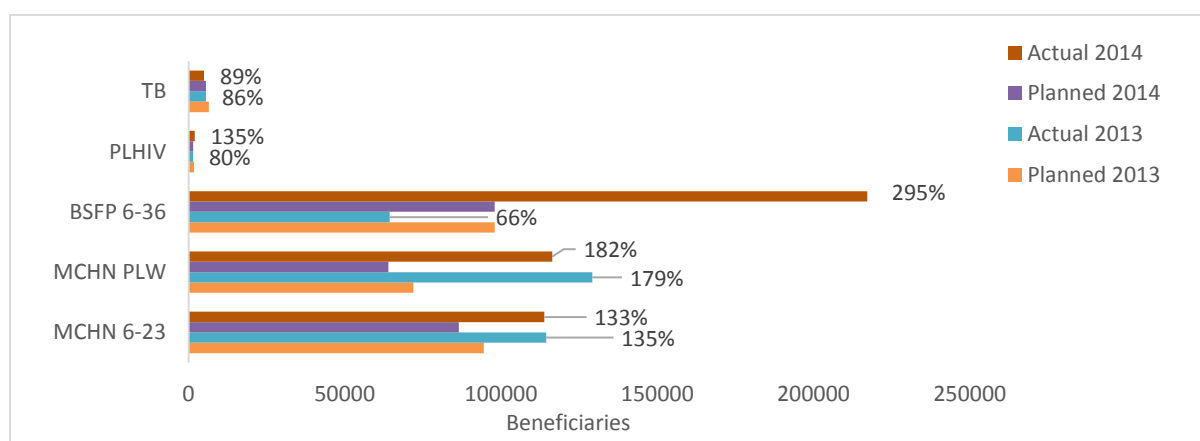
<sup>107</sup> Child treated is considered an exit (cured, died or defaulted). A beneficiary is a child who has ever received a ration.

<sup>108</sup> Analysis of TSFP registers at 6 sites in Somaliland and Puntland revealed 82% of the caseload are children 6-23m.

to larger numbers of older children being admitted with a normal Mid Upper Arm Circumference (MUAC).<sup>109</sup> The overall reduction in the numbers of children reached in 2014 compared to 2013 is also directly associated with the significant reduction in the number of sites due to the rationalization process early in 2014. The number of girls accessing treatment is slightly higher than boys but this is not significant.

97. The caseload of acutely malnourished PLW has also decreased from 104,153 actual beneficiaries in 2013 (41% of planned) to 77,838 actual beneficiaries in 2014 (44% of planned). Removing the variable of reduction of sites, it appears that the absolute number of acutely malnourished PLW is lower than estimated particularly in Somaliland. This can be attributed to the MCHN intervention, which provides a ration and health care to PLW. This is a good outcome. Analysis of data at sites visited by the ET shows that 75 percent of admitted PLW in Somaliland have a MUAC of over 20.5 cm suggesting 'liberal' use of the MUAC tapes on admission.
98. Figure 25 shows actual beneficiaries against planned for 2013 and 2014 for MCHN, BSFP and HIV/TB interventions. Large scale coverage of MCHN in Somaliland and Puntland and high enrolment rates have resulted in beneficiary numbers for children aged 6-23 months and PLW far exceeding planned in both 2013 and 2014. The high registration rates of women and young children have directly resulted in significantly increased uptake of health services (discussed below). The number of beneficiaries has remained fairly stable (243,749 in 2013 and 230,249 in 2014) as most beneficiaries remain in the programme for long periods.<sup>110</sup> Despite population movement, it indicates a stable situation and reasonable coverage. As mentioned, the significant increase in the number of BSFP interventions in 2014 was a response to high GAM rates in SCZ and resulted in beneficiary numbers 217,240 far exceeding planned numbers of 97,942 (295%). Actual beneficiaries for PLHIV in 2014 exceed planned (135%) while for TB patients it fell slightly below planned. However, this represents all beneficiaries registered with no consideration over how many rations they received.

**Figure 25: Beneficiaries MCHN, BSFP and HIV/TB: Planned and Actual 2013-2014**



Source: SPR2013 and Nutrition Unit Data 2014.

<sup>109</sup> Analysis of site registers at 4 TSFP sites in Puntland showed that 88% of older children (24-59 months) were admitted using WFHZ < -2 when MUAC exceeded 12.5cm. Thus the use of WFHZ is resulting in admission of older children who do not need to be in TSFP.

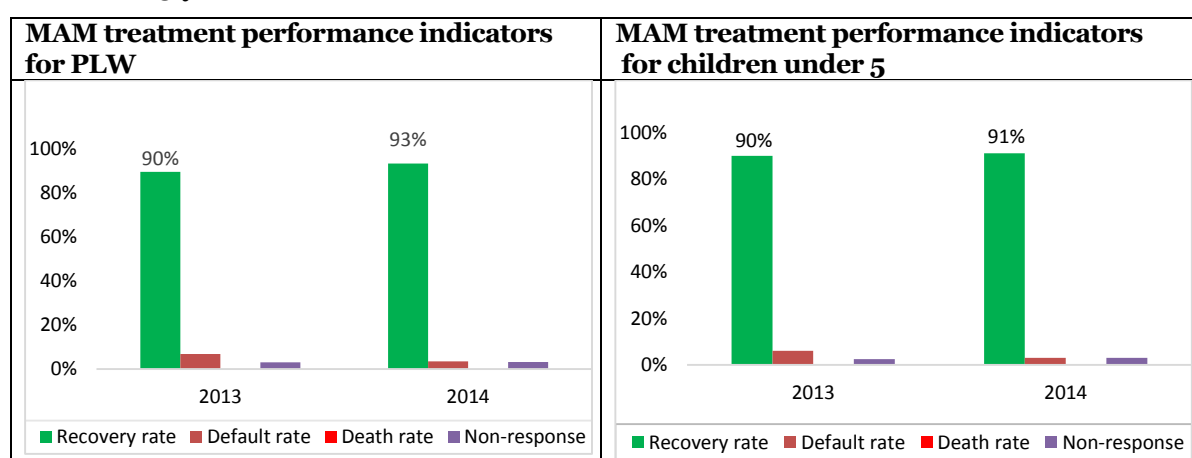
<sup>110</sup> Analysis of data from MCHN sites indicates that average length of stay (LOS) in MCHN is 13 months for children aged 6-23 months and 9 months for PLW.



## TSFP Outcomes

99. TSFP outcomes for children 6-59 months are measured against targets using standard performance indicators<sup>111</sup> for numbers discharged, recovered, died and defaulted. These outcomes are therefore comparable over time and against an international benchmark. Performance against the Sphere benchmarks for MAM cases is shown in Figures 26 and 27. Outcomes for MAM cases exceeded performance targets. Notably the cure rate (children meeting exit criteria) is over 85 percent for all zones. Default rate is low (less than 6%) and deaths rare (less than 1%). These very good outcomes have remained constant over time (2013-14). However, the data is somewhat flawed as default and non-response is often not documented at sites and is thus under-reported.

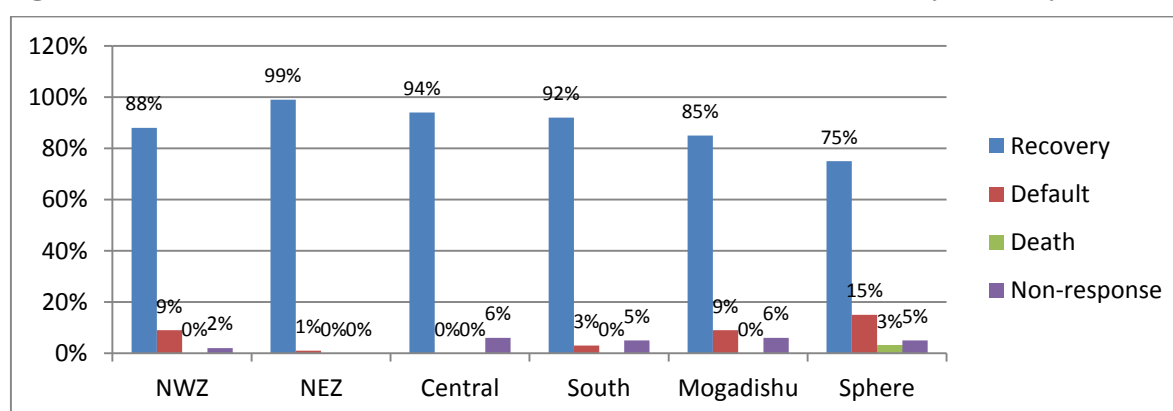
**Figure 26: MAM treatment performance indicators for PLW and for children under 5 years**



Source: WFP Som. nutrition unit database and Nutrition Cluster 4W database.

100. The difference in outcomes by zone (Figure 27) shows an almost perfect performance in Puntland (NEZ), which seems to reflect a reporting error. The reporting from Somaliland is more accurate. The ET found that default at sites visited in Somaliland and Puntland was on average 7-15 percent and thus within Sphere standards whilst non-response was found to be as high as 15 percent at some sites where ration substitution and availability was an issue.

**Figure 27: TSFP Outcomes for MAM cases in children under 5 years, by zone**



Source: WFP Som. nutrition unit database and Nutrition Cluster 4W database

<sup>111</sup> Sphere 2011.



101. Performance indicators for PLW from 2013 to 2014 for all three zones suggest 92 percent of PLW admitted were discharged as recovered. Six percent defaulted and three percent were non-responders. Reportedly default rates have dropped significantly in Somaliland and Mogadishu since 2013.<sup>112</sup> However, the data is flawed. The use of the term ‘recovered’ is somewhat erroneous since PLW are discharged recovered after 4 months irrespective of MUAC.<sup>113</sup> During the field visits by the evaluation team, it was noted that the ration is often shared among family members and the direct impact on the nutritional status of mother and infant might be questioned. The field visit, furthermore, revealed that in areas where MCHN is operational, some PLWs received two rations at the same time.
102. Analysis of screening data against numbers admitted at selected sites in Somaliland suggests 70 percent of MAM cases in the population are reached.<sup>114</sup> WFP has commissioned surveys of coverage in Somaliland and Puntland. Preliminary findings indicate 48 percent programme coverage for TSFP (48% for Somaliland and 50% for Puntland) thus meeting the Sphere minimum criteria of 50 percent for coverage of TSFP. Primary reasons for not attending were distance, no availability of ration and strong preference for MCHN.<sup>115</sup> Other localized coverage surveys in IDP camp settings found a coverage rate of 85 percent meeting Sphere Minimum Standards for a camp setting.<sup>116</sup> Planned coverage surveys will reveal more information.<sup>117</sup>
103. Modalities for TSFP include both static and mobile sites, including satellite sites. Since the rationalization process in early 2014, the number of sites and particularly mobile teams has been reduced and this has impacted coverage. Furthermore the existing services both static and mobile are not fully integrated. Thus in practice, a TSFP mobile team runs parallel to an OTP team and/or one CP is operating MCHN and another operating TSFP in a nearby location. Where one partner is operating all services (MCHN, OTP and TSFP) with one staff, there is excellent and easy referral between IMAM components and clearly observed efficient patient flow and uptake of other health and IYCF services. WFP has successfully recruited and trained 1,717 Community Nutrition Workers (CNWs) to conduct active case finding and referral to sites at community level. Analysis conducted by the team found average MUAC at admission is 12.1 cm indicating effective early case finding and referral.<sup>118</sup> These CNWs are linked to TSFP and thus where there is integrated programming their role is more effective.
104. In general the TSFP caseload size in absolute terms has declined in Somaliland and Puntland. This might be attributed to MCHN coverage and preference. Seasonal fluctuations in caseload are predictable but contingency plans for increases in caseload are not, particularly in SCZ. Relapse to MAM was reportedly low, however relapse to SAM was reported as an issue by staff at TSFP and OTP sites. This is directly associated with seasonal disease patterns and care and feeding practices.<sup>119</sup> Interviews with

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<sup>112</sup> Nutrition unit data 2013 and 2014 for PLW in TSFP and Cluster 4W compiled data for 2013 and 2014.

<sup>113</sup> Admission criteria is MUAC <21cm. Exit criteria is MUAC >21cm. Most women are discharged recovered after 4 months in the programme irrespective of MUAC. Others are admitted with MUAC higher than admission criteria. After four months in the programme without meeting discharge criteria, a PLW becomes a non-responder.

<sup>114</sup> Analysis of screening data at 6 TSFP sites in Somaliland.

<sup>115</sup> World Vision International/InfoScope. Measuring Coverage of MAM Treatment and Prevention Programmes (SQUEAC methodology). Commissioned by WFP. December 2014.

<sup>116</sup> Save the Children International. Coverage and Uptake Analysis of CMAM. Bosasso IDP camps. October 2014.

<sup>117</sup> WFP plans to conduct large scale coverage surveys using SQUEAC methodology in 2015 in accordance with the requirements of the new strategic results framework.

<sup>118</sup> Analysis of data from TSFP sites in Somaliland, Puntland and Galkayo and Save the Children compiled admission data (October –December 2014).

<sup>119</sup> World Vision International/InfoScope. Measuring Coverage of MAM Treatment and Prevention Programmes (SQUEAC methodology). Commissioned by WFP. December 2014. Interviews with CPs in Somaliland, Puntland and Galkayo. Focal group discussions with mothers in IDP camps in Galkayo.

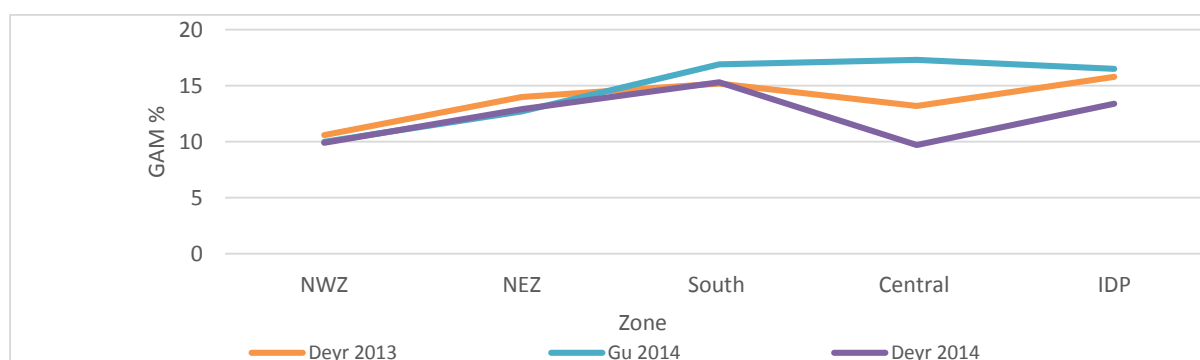
partners and community health workers suggested linking highly vulnerable families of SAM and MAM children to cash and voucher and livelihood programmes as a preferable option.<sup>120</sup>

105. Issues of inclusion include notably the use of weight for height (WFHZ) at many TSFP sites. This has resulted in older children (36–59 months) being admitted to TSFP when MUAC is normal. Moreover the use of WFHZ unnecessarily increases workload for staff at health facilities and adversely affects smooth flow of health services. Urgent revision of national protocols is needed to clarify harmonized use of admission and exit criteria. Infants under 6 months were found to be excluded from TSFP and to a large extent from OTP, also suggesting a need for revision to standard protocol. Issues with time bound/tonnage bound FLAs have resulted in children not being admitted to TSFP due to beneficiary target numbers being exceeded and insufficient food, suggesting the need for clarity on amendments to the FLA and more effective ways of calculating caseload. The ET note that WFP has taken steps to increase monitoring and transparency of criteria at community level and issues of double registration reported by WFP staff at some sites in Central Somalia will likely be addressed through use of biometrics.

### MCHN Outcomes

106. The MCHN intervention operating at scale in Somaliland and Puntland is highly successful. The blanket approach to providing a ration to all PLW and children 6–23 months is considered highly appropriate, effective and strongly supported by MoH, local authorities, health staff and beneficiaries. The MCHN centre provides an ideal opportunity for a successful ‘one stop’ model for maternal and child health services, nutrition treatment and prevention interventions. The stated aim for WFP of MCHN interventions are to reduce GAM rates and to increase uptake of health services specifically antenatal care for pregnant women and safe delivery at a health facility through provision of an incentive ration. The scale of MCHN implementation and high registration has directly resulted in reduced caseload of acutely malnourished children.<sup>121</sup>

**Figure 28: GAM Median Rates by Zone 2013-2104**



Source: FSNAU Surveys *Deyr* 2013 and 2014 and *Gu* 2014

107. The impact of MCHN is reflected in the GAM rate, which has stabilized in NWZ at 9.9 percent and 12.9 percent in NEZ, well below emergency thresholds of 15 percent. Thus it is fair to deduce that the combination of blanket rations, prevention activities and

<sup>120</sup> Interviews with CP’s in Somaliland, Puntland and Galkayo; Focal group discussions with CHWs and CNWs.

<sup>121</sup> As the majority of the caseload of acutely malnourished children are under 24 months, MCHN targeting of this group is effective in prevention. Reduction of caseload in TSFP and OTP in 2014 was clearly evident in analysis of register book admission data at 4 MCHN centres in NWZ between January 2014 and December 2014.

significantly increased access and uptake of basic health services for women and children is contributing to resilience in Somaliland.

108. Programme coverage of MCHN is estimated to be 54 percent for Somaliland and 46 percent for Puntland. In some locations coverage exceeds 70 percent. Reasons for not attending were found to be distance and issues with food rations not being available due to pipeline problems and/or beneficiary numbers exceeding planned.<sup>122</sup> Substantial anecdotal evidence suggests Plumpy’doz is well liked and has achieved positive results in terms of weight gain, reduction in duration and severity of illness and meeting developmental milestones.<sup>123</sup> However, pipeline issues have resulted in substitution of Plumpy’doz for CSB+/oil creating confusion among staff and beneficiaries. CSB+/oil is preferred by some mothers as food that can be shared by the household, whilst Plumpy’doz is strongly preferred by health staff and partners in the health sector for logistical ease and reduction of overcrowding due to food distribution which can hamper access to health services. Moreover, the length of stay (LOS) to reach discharge criteria is significantly longer when using CSB+.<sup>124</sup> Thus the importance of maintaining a reliable pipeline of Plumpy’doz is paramount.
109. The MCHN intervention has achieved considerable success in increasing access to and uptake of health services. As mentioned, this is not directly captured in the indicators presented in the SPR in line with WFP’s mandate but only indirectly through the indicator on number of health centres being assisted. Likewise, the monitoring and evaluation plan for the CO suggests process indicators that will only partly capture the health uptake outcome.<sup>125</sup> The provision of a ration for pregnant women is highly correlated with a significant uptake of antenatal care (ANC) services and safe delivery at the health facility by a trained midwife. Other factors including availability of staff, emergency obstetric services and ambulance transport provided, although the JHNP have also contributed to uptake of safe delivery. However, the ration is a significant pull factor. Analysis of uptake of ANC and safe delivery before programme onset in 2012 and after intervention in 2013 and 2014 was conducted based on data from 4 MCHN sites in Somaliland and Puntland. This was correlated with available MOH data. Analysis showed significant uptake in ANC visits over baseline. Moreover, the frequency of ANC visits has also increased as illustrated in Figure 29. Whilst uptake of ANC visits 1 and 2 is usually fairly high, uptake of visits 3 and 4 tails off markedly. The pull factor of the ration is directly contributing to completion of the minimum package of antenatal care services as defined by national policy.<sup>126</sup> Thus the MCHN intervention is contributing significantly to health sector strategic goals for maternal health as well as MDG 5. Similarly safe delivery has also increased as shown in Figure 29. An estimated 54 percent of women have an attended delivery at a health facility, which is a substantial increase over baseline of 22 percent.<sup>127</sup>

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<sup>122</sup> World Vision International/InfoScope. Measuring Coverage of MAM Treatment and Prevention Programmes (SQUEAC methodology). Commissioned by WFP. December 2014.

<sup>123</sup> Interviews with health staff at MCHN sites. Focal group discussions with Community Nutrition Workers, TBAs and mothers of children registered in the programme and receiving or having received Plumpydoz.

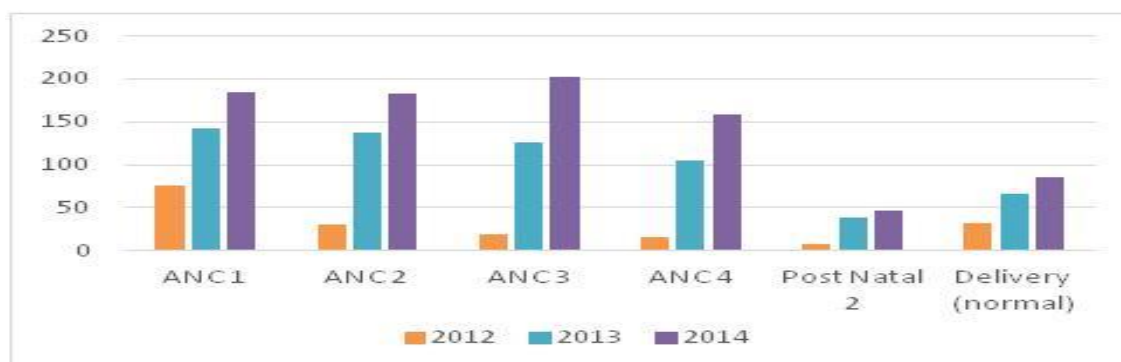
<sup>124</sup> Analysis of cards and program data at 6 sites in Somaliland and Puntland and Galkayo showed average LOS of 2 months with RUSF compared to 4 months with CSB+/oil.

<sup>125</sup> Percentage of health centers offering services (2013) and Basic nutrition services: Micronutrient Supplementation: Deworming drugs: Health and Nutrition Education & (IEC) (2014-2015).

<sup>126</sup> Health Sector Strategic Plan 2013-2016. Minimum package of antenatal care includes 4 antenatal visits, identification of pre-existing conditions, early detection of complications, health and nutrition promotion, disease prevention and birth preparedness and planning.

<sup>127</sup> World Vision International/InfoScope December 2014.

**Figure 29: ANC and Facility Based Delivery Uptake 2012-2014**



Source: Compiled data from 4 MCHN sites in Somaliland and Puntland and MOH data.

110. Available data also shows an increase in uptake of associated health services for maternal health including tetanus toxoid (TT) vaccination, family planning and iron/folate supplementation resulting in decreased incidence of severe iron deficiency anemia (IDA). Delivery at the health facility and outreach services in the post-natal phase have increased early initiation of breastfeeding reportedly from 23 percent to 80 percent at some sites according to the MoH in Somaliland.<sup>128</sup> The presence of mothers and young children at MCHN clinics has also increased vitamin A, deworming and vaccination coverage with 60 percent of mothers interviewed.<sup>129</sup> Changes in practice due to increased awareness and counselling have also increased hand-washing and ORS.<sup>130</sup> These findings on uptake of health services are indicative and must be further substantiated by a detailed impact analysis, which WFP has planned for 2015.

111. Although the MCHN intervention has been successful in increasing uptake of health services, the use of food rations has led to overcrowding at health facilities resulting in complaints that access to basic health services is affected.<sup>131</sup> This can be addressed through effective integrated prevention and treatment programming by the same staff and smooth client flow and importantly, use of RUSF rather than fortified blended foods and oil. Importantly, the high registration in MCHN and uptake of health services for women and children requires a simultaneous availability of essential drugs and supplies and equipment. The increased number of deliveries for example has led to a shortfall in essential obstetric supplies and equipment in some health facilities. It is therefore essential that WFP effectively coordinates with MoH, health authorities and partners under the JHNP to ensure this is addressed. This highlights once again the importance of WFP presence at zonal health sector coordination meetings. Other unintended consequences include reputational risk of WFP and partners at community level when rations are partially or totally unavailable. This has been the case in PLHIV/TB programmes and to some extent in TSFP and MCHN.

<sup>128</sup> Review of antenatal registers at MCHN sites in Somaliland and Puntland. Interviews with midwives at MCHN sites.

<sup>129</sup> Focal groups with mothers of children registered in MCHN and verification of health cards.

<sup>130</sup> Changes in Practice in Hygiene, Health and Breastfeeding. Knowledge Attitudes and Practice (KAP) Assessment Report Somaliland. SOLNARDO/MoH/WFP. October 30, 2013.

<sup>131</sup> Concerns related to overcrowding and access to basic health services due to use of CSB+/oil at health facilities instead of ready to use foods was expressed by MoH officials and partners in the JHNP.

## Other Outcomes

112. Coverage of BSFP is low in Somaliland (17%) and Puntland (23%).<sup>132</sup> Stability of the GAM rates and lower caseloads in treatment programmes suggest some impact. However, the evidence suggests that MCHN is having much greater and more sustainable impact than BSFP. The two interventions focus on the same target group of children 0-24 months. The stable GAM rate and MCHN programme suggests that BSFP has become redundant in Somaliland and Puntland. This finding is strongly supported by MOH in both zones who expressed a strong preference for expanded coverage of MCHN and cessation of BSFP as a clear priority and efficient and effective use of limited resources. This is not the case in south/central Somalia where MCHN coverage is as yet very limited.<sup>133</sup>
113. Reported results of the PLHIV and TB treatment interventions suggest that 97 percent of PLHIV under ART and 79 percent of TB patients under DOT treatment achieved nutritional recovery.<sup>134</sup> This is difficult to substantiate since there are no clear entry and exit criteria for this programme and clients often remain in the programme indefinitely. Given the substantial issues with availability of rations, MOH staff and CPs noted that clearly defined criteria and targeted individual rations using Ready to Use Food (RUF) would be preferable.<sup>135</sup> The intervention is sensitive and of high priority to the MoH and thus clear agreement of one lead partner with GFTAM funding and clearly defined purpose of the programme in line with national and international guidance on Nutrition Assessment, Counselling and Support (NACS) programming is suggested.<sup>136</sup>
114. WFP sought to include a strong focus on community based behavioural change and IYCF in recognition of the clear finding that the primary cause of acute malnutrition and stunting is associated with disease, care and feeding practices and to strengthen resilience in line with the overall focus of the PRRO.<sup>137</sup> However this has not come to fruition due to staff cut backs because of lack of funding, of core Behaviour Change Communication staff and non-renewal of the contract with a key partner in this area.<sup>138</sup> WFP has trained 1,717 community nutrition workers (CNWs) whose primary function is active case finding and referral. In some cases, CNWs have been trained in IYCF and/or joined UNICEF training on the basic package of services for government and UNICEF supported Community Health Workers (CHWs). Focal group discussions with CNWs and CHWs found some successful overlap between community cadre notably CNWs, CHWs and TBAs and good examples of mother support groups at community level resulting in observed changes in practice in exclusive breastfeeding and complementary feeding.<sup>139</sup> The package of services provided by the various community cadre is not standard and the quality is variable with some providing practically focused participatory support while others are only didactic in approach.

### 2.2.2 General Food Distribution

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<sup>132</sup> World Vision International/InfoScope, December 2014.

<sup>133</sup> Interviews with Ministry of Health Directors in Somaliland and Puntland.

<sup>134</sup> WFP Standard Project Report. 2013 and 2014.

<sup>135</sup> Discussions with MoH in Somaliland and Puntland. Discussions with CP partners managing HIV/TB interventions.

<sup>136</sup> National Guidelines for Nutrition, Education, Counselling and Support (NECS) of PLHIV and TB Patients (Draft in progress May 2013). Nutrition Assessment Counselling and Support (NACS) for People Living with HIV and TB. September 2013. FANTA/AED. Available at <[www.fantaproject.org](http://www.fantaproject.org)>

<sup>137</sup> WFP. Somalia Communication for Behavior Change Strategy for Interventions under PRRO 200443. June 2013.

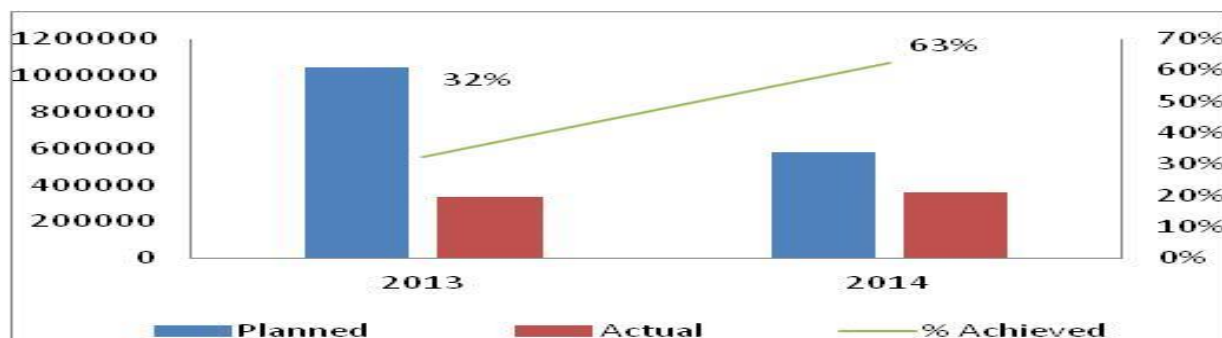
<sup>138</sup> SOLNARDO FLA contract for behavioural change communication (BCC) work in Somaliland was not renewed in 2014.

<sup>139</sup> Focal group discussions with CNWs, CHWs, TBAs, and mothers in Somaliland, Puntland and Galkayo.

115. WFP has provided general food distributions as relief for households and communities facing food insecurity linked to drought and to food insecure IDPs and urban people. The monthly family rations consist of 75 kg of cereals, pulses, corn-soya blend and vegetable oil.

116. Figure 30 shows that the planning figures for 2013 were set at providing general food (GFD) to 645,000 people (51% female). However the general improvement of the food security situation in Somalia in 2013 led to a reduction in the number of relief beneficiaries for general food distribution. As such, the actual beneficiaries of GFD were 32 percent of the planned numbers. In 2014, a continuation of the overall improvement of the food security situation was expected and the planning numbers for GFD were set at 180,000 (50% female). As explained earlier, the food security situation worsened significantly in response to a failure of the Gu rains and road blockades in 2014. As a result, during 2014 the number of beneficiaries doubled to 363,000 people.

**Figure 30: General food distribution beneficiaries - Planned vs. Actual**



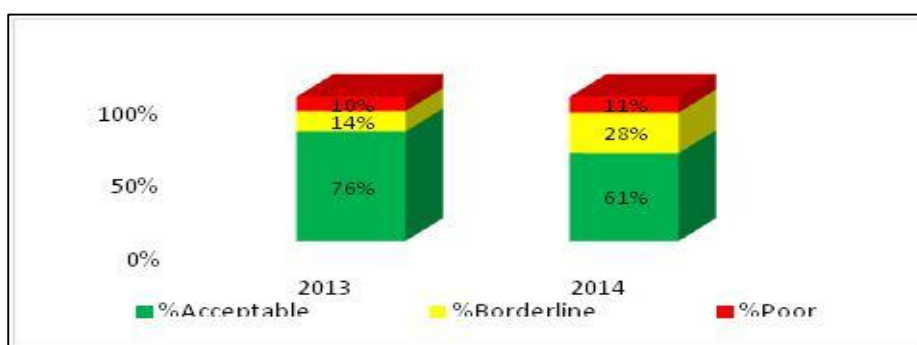
Source: 2013 SPR and 2014 SPR (preliminary)

Note: Planned amounts include contingency household relief/cash.

117. The planned outcome for the GFD component was initially “improved food consumption over assistance period for targeted households” and modified to “stabilized or improved food consumption over the assistance period for targeted households and/or individuals” with the 2014 Strategic Plan. The WFP targets were that above 80 percent of households should have an acceptable food consumption score (FCS), and less than 20 percent should have a poor FCS. However, according to the SPRs from 2013 and 2014 the target for acceptable FCSs was not met as can be seen in Figure 31. On the other hand, the percentage of households with poor FCSs was well below the target levels. The FCSs are calculated based on data from post-distribution surveys (March 2013 and September 2014). As GFD is implemented as a short-term relief measure to emergencies, there are typically no baselines. Considering the relative important level of borderline cases (14 percent in 2013 and 28 percent in 2014), the ET considers that the GFD for relief has been successful when measured against the PRRO defined targets. It can be expected that with more documentation for relief operations in different areas, a benchmark can be established in the future.



**Figure 31: Household Food Consumption Score (% of households)**



Source: SPR 2013 and SPR 2014 (preliminary). Data collected in Mar-2013 and Sep-2014 as part of post-distribution monitoring.

118. Project data also shows that throughout the project more than 10 percent of households have poor food consumption scores despite being provided with food assistance. These results indicate the strong need for strengthening household and community resilience in order to limit the need for relief.
119. The other outcome indicator of the GFD was dietary diversity. The WFP target was 5.7 food groups consumed by households, and the PRRO has achieved 5.65 (female-headed households) and 5.55 (male-headed households).

### 2.2.3 Wet Feeding

120. When the PRRO was designed the level of food insecurity was still very high and in the immediate transition from the EMOP to the PRRO, there was a need for the continuation of relief activities. With the continuous stabilization and improvement of food security situation, relief activities were scaled down in the planning for 2014. This was then increased to 10,000 metric tons distributed per month between July and September 2014, as a result of the deteriorating food security situation.
121. Under the relief option, the PRRO has continued wet feeding programmes in Mogadishu and Kismayo providing hot cooked meals to IDPs and vulnerable host populations. The distribution of hot meals in Kismayo was not planned. The ration provided through the wet feeding programme consists of 2,200 Kcal per person per day, meeting the daily caloric requirements of targeted beneficiaries.
122. Wet feeding beneficiaries are self-selected based on the assumption that only those in dire need will spend time to travel to the food distribution and line up for their daily ration. According to an evaluation of a wet feeding operation run by the Danish Refugee Council during the famine, waiting times for wet feeding in urban centres were typically four hours.<sup>140</sup> On the other hand, according to the rapid assessment carried out by WFP in December 2013<sup>141</sup> in the urban areas of Kismayo, a certain segment of vulnerable urban poor choose not to benefit from wet feeding because of social factors related to people using food distributions.<sup>142</sup> The assessment furthermore notes that for IDPs there seem to be social factors preventing the most vulnerable from benefiting from wet feeding. While the ET recognizes that there might be some beneficiaries who do not meet the criteria for being the most vulnerable, the ET agrees with the argument that targeting

<sup>140</sup> DRC (2012) "Final Evaluation Report of the Wet Feeding and Cash Transfer Project in Southern Somalia" Available at < <http://www.alnap.org/resource/7771.aspx>>

<sup>141</sup> WFP Somalia (2013) "Rapid Emergency Food Security Assessment in urban areas of Kismayo city, Lower Juba region of Somalia".

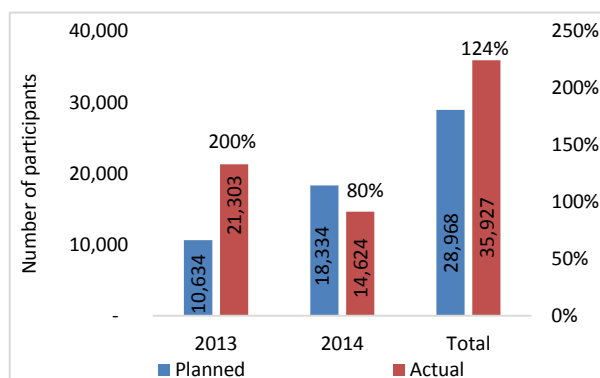
<sup>142</sup> According to the assessment there is a stigma attached to participation by poor households in Kismayo

and verification costs might easily be higher than the derived benefits. However, the ET did not see verification measures for instance through single ad hoc controls for the Mogadishu wet feeding to profile beneficiaries in a similar manner as has been done through the rapid assessment in Kismayo. However, according to the WFP staff in Mogadishu general observations at the distribution sites in Mogadishu indicate the majority of beneficiaries are women and children. This corresponds to the abovementioned Danish Refugee Council evaluation finding that most beneficiaries were women (54%), followed by children (40%) men (5%) and the disabled (0.4%). UNHCR is currently undertaking a general profiling exercise of IDPs in Somalia. It is expected that the results of that exercise could improve the understanding of the appropriateness of the wet feeding activities and eventually improve the results.

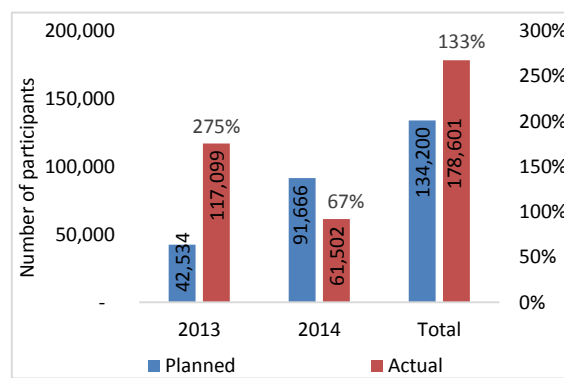
## 2.2.4 Livelihoods

123. Figures 32 and 33 below show the planned vs. actual numbers of participants for the livelihood activities. In 2014 actual beneficiaries for both FFA and FFT fell below target. Despite this the 2013 and 2014 cumulative figures show that the actual beneficiaries for the two years when combined exceeded the cumulative planned beneficiaries. Having overshoot the 2013 target, the program was able to target fewer beneficiaries with activities in 2014 while still attaining its overall beneficiary targets. The high performance in 2013 was a result of implementing recommendations from the Food Security Cluster that proposed a shift in focus from relief onto FFA/T during periods of improved food security.

**Figure 32: Planned vs. actual participants - Food for Training**



**Figure 33: Planned vs. actual participants - Food for Assets**



124. The manner in which beneficiary households were selected varies. In the majority of areas, households are selected based on context specific selection criteria arrived at through consultations among stakeholders, and informed by the nature of the specific intervention. A 2014 Post Distribution Monitoring report<sup>143</sup> found that although most of the livelihood beneficiaries were selected by community committees, CPs, community elders and local authorities also each selected a sizeable number of the beneficiaries (57%).

125. The community level targeting was broad-based and consultative, with targeting committees comprised of community representatives, community elders, local government, CPs and local NGOs. This allowed for contextualised assessments when

<sup>143</sup> Biannual Post Distribution Report July 2014.



identifying high-risk households. It also promoted transparency, which is key to securing buy-in. However, with this system there was no standardised method<sup>144</sup> of beneficiary selection as each area entrusted the role to a different entity, either a CP, community elders or LAs. No rationale was provided for why it varied from region to region.

126. The overall approach to both design and implementation has given special attention to the role of women. Women and female-headed households received prominent consideration during targeting, resulting in a minimum of 70 percent of FFT participants. FLAs also require that as far as possible assistance is placed directly in the hands of women. In addition, during implementation, women comprised 50 percent or more of the beneficiary selection committee members and the subsequent management committees. Some FFA/Ts also provided childcare services for women who were engaged in work or training.
127. A relatively good food security situation in 2013 allowed WFP to expand its resilience enhancement activities leading to a significant increase in the number of assets that were created or rehabilitated through FFA. Almost all livelihood activities not only met but exceeded the planned outputs for 2014. A 2014 increase in funds earmarked for training activities increased overall FFT output. The full list of outputs achieved through the livelihood interventions can be found in Annex 9.
128. The number of community consultations and action plans developed were significantly higher than planned as community consultations previously required for resilience activities became mandatory for all WFP livelihood projects from February 2014. WFP also trained 11 partners on technical skills such as construction of check dams, reporting, monitoring and evaluation, and conduction of effective community consultations. However, due to limitations in funding, WFP was not able sufficiently to conduct the planned training activities across all its area offices. Although only 25 percent of the annual beneficiary target was achieved, the voucher activities that were implemented achieved outputs beyond the planned target.

### Livelihoods outcomes

129. None of the FFA targets under the SO1 (relief) were achieved in 2013 or 2014. For recovery targets (SO2 in 2013 and SO3 in 2014) targets were generally surpassed in 2014 while not in 2013. Finally, for FFA resilience activities (SO3 in 2013 and SO2 in 2014) targets were generally achieved and surpassed in both 2013 and 2014.

**Table 1: Outcomes of FFA activities**

Strategic Objective	Outcome	Activity	PRRO Target	Last Follow-up in 2013	Last Follow-up in 2014
2	CAS: percentage of communities with an increased Asset Score	V/FFA	CAS increased in value in over ≥80% of HHs assisted	100	100
3	CAS: percentage of communities with an increased Asset Score	V/FFA	CAS increased in value in over ≥80% of HHs assisted	100	75

Source: SPR 2013 and 2014. Note: The components of the asset score are not provided in the material provided.

<sup>144</sup> Ibid.

130. Although WFP greatly exceeded its output targets under SO3, there was a dip in outcomes in 2014. The decrease in outcome results may be a consequence of combined factors. Firstly, there was an increase in insecurity in the South for much of the second half of the year that forced the suspension of activities in the region. Moreover, the activities are planned for one year and were launched in March 2014 so the results from the SPR collected at the end of 2014 does not reflect outcomes of all activities.
131. One unintended positive effect was that the FFA increase in water assets promoted girls school attendance as it lightened their domestic workload. Also, parents who participated in the FFA/T were reported to be more likely to send their children to school. A number of FFA projects targeted towards asset creation had an emphasis on environmental protection which encourages communities to view land as a resource that should be conserved and some communities began to prioritise the construction of an increased number of check dams and water conservation measures for this reason.
132. According to anecdotal evidence collected during the visit to the border area, the construction of the airstrip in Dolow under the FFA strengthened economic activities in the area. Although the airstrip was meant for WFP activities, it attracted other users especially traders. This increased the level of trading activities in the area, a factor that likely alters the socio-economic conditions of the households.
133. The sustainability of the assets created or enhanced during FFAs depends partly on the maintenance of the asset. On completion of the projects, the management of rehabilitated or assets created through the PRRO support was handed over to community project committees. These project committees would have received some training during the course of the project and may also have received non- food-items (NFIs) to enable maintenance of the asset. It is not clear how successful the communities have been at maintaining the assets as no data tracking the outputs over a period of time was made available for this review. It is noted that an M&E programme on the sustainability of livelihood assets was started in 2014 to look at the assets durability and functionality 6, 12 and 18 months after the end of the project although results of the same are not yet available. Sustainability under FFTs was generally addressed through linking graduates either with potential employment opportunities or sources of capital during the training period.
134. Under FFA, the choice of activity is a critical factor in sustainability. Activities that focus on the food distribution component without linking the activity to the overall goal of building resilience will lack sustainability. Sustainability also requires strategic selection of assets to enhance. This was illustrated when one 2014 mission to Dolow<sup>145</sup> noted that the FFA canal rehabilitation was being implemented on privately owned land and while some of the FFA beneficiaries were share croppers on the land there was no guarantee that they would continue to be allowed to farm that land and therefore derive direct benefit from the asset. (To remedy this particular situation MoUs were then sought with the landowners to guarantee the beneficiaries farming access to the land for a period).
135. The impact of FFT and comment on the sustainability of the benefits of the FFT activity is more difficult to measure in the absence of longer term and more specific outcome monitoring. For instance, it is not clear how many of the FFT beneficiaries have been able to secure incomes as a result of the courses undertaken.

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<sup>145</sup> Dolow Joint Resilience Strategy Mission - 16-19 January, 2014.

136. WFPs comparative advantage lies in its human capital, resource capital and social capital. The AOs bring skills, experience and local knowledge. There may be gaps in the technical expertise required for FFAs and FFTs but this can be remedied through strategic partnerships and capacity development programmes. Due to its successful engagement in Somalia over the years, WFP enjoys goodwill among beneficiaries, government and other humanitarian actors. Although shortfalls are a constant challenge within the operation, WFP does enjoy the confidence of donors and the shortfalls are likely to be more an indication of the funding climate than anything else.

## 2.2.5 School Feeding

137. The results presented in this section are based on the SPR reports, which reflect data collected at the schools supported, including enrolment and attendance rates for girls and boys. The daily attendance sheets are controlled regularly by the CPs.

138. The PRRO planned for the school feeding activities to be implemented in Somaliland, Puntland and SCZ. Due to accessibility constraints, border areas were planned for the initial provision of school snacks, which would be replaced with cooked meals.

139. In the design of the PRRO, all schools were to receive the same ration per child, for both school meals, and for take-home rations (THR). WFP's school feeding programme provided two cooked meals per day (breakfast and lunch) to boys and girls and THR to girls in targeted primary schools. School meals included Super Cereal (breakfast) and cereals, pulses and vegetable oil (lunch). THR comprised of 3.6 kg of vegetable oil per child per month for girls with attendance rates of 80 percent or more. In 2013, WFP also planned to provide 130,873 children with a cash-based THR. However, this did not eventuate due to lack of unrestricted funding. As a result, the assistance modality for the school feeding program has been in-kind food provision throughout the PRRO.

140. The number of schools assisted by WFP in 2013 and 2014 was lower than the number of planned, 380 and 444, respectively (Table 2). Schools were located in Somaliland, Puntland and south-central Somalia primarily in rural, food insecure areas. In 2013 some schools in southern Somalia did not receive the planned assistance as they were already receiving school feeding from an international NGO, and assistance was suspended at several schools in Somaliland and Puntland due to alleged food misuse. In 2014 the expansion of the school feeding programme took longer than expected due to the time needed to fully engage local authorities, ministries and the community, hence the planned target number of schools was not reached.

**Table 2: Schools assisted and government/national partner staff trained**

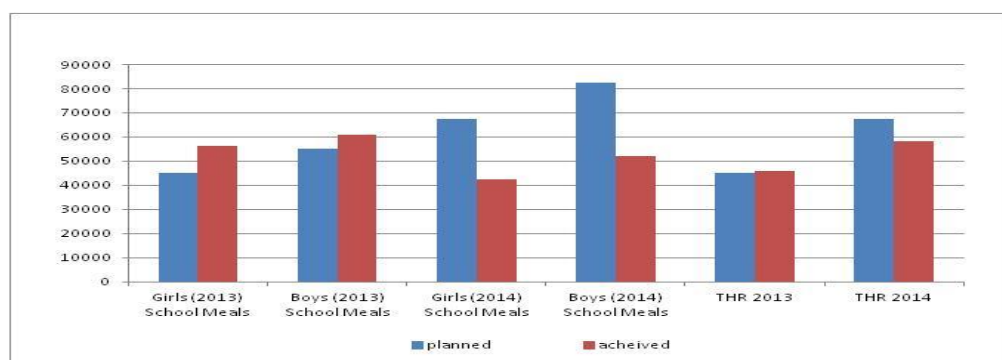
Outputs	2013		2014	
	Planned	Achieved	Planned	Achieved
Number of schools assisted by WFP	444	380	548	444
Number of female government/national partner staff receiving technical assistance and training - Female	4	3	160	24
Number of female government/national partner staff receiving technical assistance and training - Male	11	10	640	148

Source: SPR 2013 and 2014

141. In 2013, only 4 female staff were targeted to receive training and technical assistance of which 3 were trained. The targets were increased in 2014 to 160 but only 24 received training or technical assistance. For male staff, 11 were earmarked for training in 2013, of which 10 were reached. In 2014, the number planned was 640 but only 148 were trained. The low achievements in 2014 were due to the delay mentioned above in the expansion of the school feeding programme.

142. The programme provided meals (breakfast and lunch) for boys and girls and THR for girls in public primary schools. Figure 34 shows that in 2013, the school feeding programme exceeded its planned number of beneficiaries by 24.9 percent and 10.7 percent for boys and girls respectively. However, in 2014, targets were not met, 36.6 percent (boys) and 37.2 percent (girls). Likewise, in 2013, WFP was able to meet the target for take home ration beneficiaries, but failed to do so in 2014. The calculation of girls receiving THR as presented in the SPR is not based on the real counts but on a formula considering enrolment minus 25 percent to reflect that attendance rates are normally lower than enrolment rates. While this might be justified, the ET notes that the number of girls receiving THR was much higher than the number of girls receiving school meals in 2014.

**Figure 34: Planned vs. actual school feeding beneficiaries**



Source: SPR 2013 and 2014

## School Feeding Outcomes

### Enrolment

143. Enrolment data was not reported in 2012/13 as it was not required in the SPR. WFP reported enrolment figures for the first time in 2014 as part of the indicators in the new corporate Strategic Results Framework<sup>146</sup>. The 2014 data (Table 3) shows that planned enrolment figures were surpassed by both the boys and girls. Girls' enrolment was surpassed by 5.7 percent while that of boys was surpassed by 7.1 percent. The gender ratio in 2014 was 1.0 girls to boys, which was the same as the planned ratio.

**Table 3: Educational Outcomes of School Feeding Activities**

Outcomes	2013		2014	
	Planned	Achieved	Planned	Achieved
Enrolment - Girls	Data not reported		44,591	47,150
Enrolment - Boys	Data not reported		54,203	58,064

<sup>146</sup> SPR 2014.

Enrolment - Gender Ratio girls to boys	1.0	0.8	1.0	1.0
Retention - Girls	85%	95.2%	85%	97%
Retention - Boys	85%	95.5%	85%	97%

Source: 2013 SPR and 2014 SPR

144. From the schools visits and reports collected in the field especially in SCZ, the majority of the schools had more girls enrolled than boys. Most of the schools did not keep a daily register and therefore do not have accurate attendance records. The class-by-class records showed the enrolment levels declined as students progressed to the higher classes. In one of the schools, which we can consider representative, the number of pupils in class 8 was only 6 percent of the school population in a situation where 12 percent would be ideal.

### **Retention**

145. According to WFP records, the planned outcomes for retention in 2013 and 2014 were achieved and surpassed for both boys and girls. However, the ET observed during the field visits that retention is relatively low in higher classes. Further, though the number of girls was higher in the lower classes, the ratio tended to change in the latter classes especially in class 7 and 8 where there are more boys than girls.

146. According to the teachers and some education officials, dropouts in the upper classes are associated with early marriage and competition with other opportunities. Boys tend to drop out in order to engage in other income generating activities to assist in the households as well as for their own interest. Girls on the other hand tend to drop out in order to provide additional domestic labour, such as taking care of younger siblings, as well as child marriage.

### **Other outcomes**

147. School feeding encourages children to come to school. In some of the schools visited, the number of children attending school exceeded the school capacity especially in the lower classes leading to overcrowding. According to the teachers, the consequence of this overcrowding is that teaching becomes more challenging and as result the overall learning outcomes are comparatively low.

148. The use of the THR for the girls has been a major influence in attracting and keeping girls in school. However, its provision brought about an expectation such that, when not provided for because of delivery delays, parents complained and expected some type of refund according to an education official interviewed for the evaluation.

149. Finally it should be noted that according to the teachers in the schools visited, the main behavioural change seen as a result of the food provided included increased concentration in class by the pupils. This makes teaching and the learning experience in general better than in the absence of school meals.

### **2.2.6 Use of Cash and Voucher Modalities**

150. While the design of the cash and voucher component was appropriate and based on sound assessment and analysis the implementation has not proceeded according to plan and the cash and voucher activities are yet to be fully realized. WFP planned to reach 578,000 beneficiaries with cash or voucher interventions by the end of the PRRO. To date, the actual figure is 79,322 beneficiaries (13.7% of planned) (Table 4).

Approximately US\$5.4 million has been provided to cash and voucher beneficiaries, compared to the US\$55 million originally planned (9.8%). The cash and voucher figure was eventually revised downward to US\$23 million, but still this target has not been achieved (23% provided) (Table 5).

**Table 4: Planned vs. actual beneficiary numbers for cash and voucher activities**

Activity	Target population	Planned	Actual	% Achieved
CFA/FFA/FFT	General population in WFP/FAO/UNICEF supported areas; food security as entry point	183,000	60,108	32.8
CFA/FFA/FFT	General population (food security as entry point)	318,000	19,214	6.0
Cash/Food incentive for girls school attendance	Primary school girls	77,000	0	0
<b>TOTAL</b>		<b>578,000</b>	<b>79,322</b>	<b>13.7%</b>

Source: PRRO Project Document and WFP Somalia CO

**Table 5: Planned vs. actual value of cash distributed**

		Planned	Actual	% Achieved
2013	CFA/FFA/FFT	7,361,199	2,603,558	35%
	GFD	1,620,000	-	0%
	HIV/TB : Mitigation & Safety Nets	36,720	-	0%
	School Feeding	130,873	-	0%
	<b>Sub total 2013</b>	<b>9,148,792</b>	<b>1,603,062</b>	<b>18%</b>
2014	CFA/FFA/FFT	997,908	2,619,408	262%
	Others	13,040,516	1,143,193	9%
	<b>Sub total 2014</b>	<b>14,038,424</b>	<b>3,762,601</b>	<b>27%</b>
<b>Total</b>		<b>23,187,216</b>	<b>5,365,663</b>	<b>23%</b>

Source: SPR 2013 and SPR 2014 (Outputs Table). The data from 2014 and 2013 Outputs Table do not match what is listed in the 2013 and 2014 SPRs as the total planned vs actual C&V distributions. The ET has used the totals for 2014 and 2013 from the Cash/Voucher Summary table in the 2013 (pg 9) and 2014 (pg 7) SPRs.

151. It was initially planned that cash and voucher modalities would be utilized in a wide range of activities, under multiple programme objectives (Table 5). Funding shortfalls as well as earmarked funding experienced in 2013 led to a suspension of the voucher rollout for relief activities while vouchers were used for livelihood activities..
152. The voucher modality has successfully been rolled out in four out five AOs.<sup>147</sup> Of the 60,108 beneficiaries who accessed their food requirements by redeeming vouchers 56 percent were women. This was in part due to the deliberate targeting of women for vocational training activities in Mogadishu where women comprised 71 percent of the trainees. The 2014 output figures however do include some beneficiaries for 2015 as the VFT in Mogadishu was reorganised in such a way that these beneficiaries actually started vocational training in the last quarter of 2014.
153. In 2013, the value of the vouchers for training was calculated to meet 50 percent of the household food requirements based on local market prices. This was revised to 75

<sup>147</sup> The current voucher activities are implemented in Bosaso (VFA), Garowe and Galkayo (both VFA and VFT), and Mogadishu (VFT).

percent in 2014. In 2013, the value of the VFT was US\$37 which is less than half of the average cost of the minimum expenditure basket (CMB) calculated by FSNAU for 2013.<sup>148</sup> While, the ET recognizes the budgetary constraints, it is concerned that the voucher value meets less than 50 percent of the CMB given that the beneficiaries have low household incomes and few income-generating options. Moreover, during the field visit, the ET noted that the costs for transporting the food could be up to US\$10 in some areas; costs that are not considered in the CMB.

154. The ET found some positive results of the voucher activities including beneficiaries being able to purchase food items and that beneficiaries in some communities have been able to negotiate lower prices from the vendors due to bulk purchases. Still, the ET found that there are a number of issues with the voucher process that need to be resolved. These include the following:

- In some locations, very few traders had the capacity to provide food for the required number of beneficiaries.
- Beneficiaries in some locations reported being unaware of their entitlements.
- Voucher denominations are cumbersome for some of the vendors to reconcile.
- Moreover, some of the traders are illiterate and find it difficult to complete the required voucher reconciliation forms.
- The administrative burden of the current voucher approach is high. Electronic registration and smartcard vouchers as recommended in 2012 might improve this.
- In some areas, traders reported that food prices in some locations had increased but payment was steady, resulting in lost income.

155. A large number of humanitarian agencies in Somalia currently utilize the existing system of the hawala agents to provide cash to their beneficiaries. The Somali community is already very familiar with the use of hawala agents as they are also the key mechanism for receiving remittance. The rise of cash-based programming in Somalia in the last decade has also stimulated interest from telecommunications companies to provide cash delivery through the mobile phone network,<sup>149</sup> which operate in a similar manner to the M-Pesa system in Kenya.<sup>150</sup> Humanitarian agencies therefore now have multiple options in some locations through which to provide cash assistance.

156. WFP is still investigating these options, as they consider there are limited means of delivering cash transfer to beneficiaries in a secure and safe way, and the lack of regulated financial service/banking institutions to be a limitation. While there is some merit in these assertions, many humanitarian agencies, including other UN agencies, have been successfully implementing cash programming in Somalia for more than a decade, and have conducted extensive risk analysis on the various transfer modalities. These agencies have provided cash transfers to beneficiaries by putting appropriate mitigation measures into their programming. There is therefore no reason why WFP cannot do the same, at least on a pilot basis, rather than continuing to use only vouchers.

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<sup>148</sup> The minimum expenditure basket consists of minimum quantities of essential and basic food and non-food items. In 2013 the average cost of the CMT in Mogadishu was US\$94 per month/family - i.e. the value of the voucher covered on average 39% of total costs of minimum basket for one family.

<sup>149</sup> Including Harmud, Golis and Telesom

<sup>150</sup> M-Pesa is a mobile-phone based money transfer and micro-finance service, launched in 2007 by Vodafone for Safaricom and Vodcom. The service allows users to deposit money into an account stored in the mobile phone. These funds can then be withdrawn through a large network of agents, or spent with registered vendors for various goods and services. More information can be found at <http://www.safaricom.co.ke/personal/m-pesa>

## 2.2.7 Gender

157. The gender activities in the project have mainly consisted of targeting to promote women's opportunities including participation, training, and health activities. While the M&E framework does not include indicators on women's empowerment as such, anecdotal evidence collected during the evaluation suggests that these activities have allowed women to gain more control over their lives and strengthen self-reliance.
158. While the targeting criteria applied in the PRRO has successfully increased the number of female participants in all activities, including school meals, the lack of proper gender analysis at the local level to understand the specific conditions has led to application of a lot of suppositions based on generalized ideas about role of rural women in rural and traditional societies in Somalia. While the gender marker is in principle a good supporting tool for gender sensitivity, it was noted during the evaluation mission that some WFP proposals for the CAP presents a gender marker of '3' – for a scale that can only go from 0 to 2. Apparently, no one has reacted to this obvious mistake.<sup>151</sup>
159. However, a major result of the operation has been an increase in attention to the use of sex-disaggregated data, which eventually should lead to greater understanding of the gender roles in different regions of Somalia. Table 6 shows that only one out of the four targeted gender related outcomes has been met.

**Table 6: Gender Related Outcomes**

	<b>Target</b>	<b>2014</b>
Proportion of households where females and males together make decisions over the use of cash, voucher or food	<b>30</b>	<b>13</b>
Proportion of households where females make decisions over the use of cash, voucher or food	<b>70</b>	<b>86</b>
Proportion of households where males make decisions over the use of cash, voucher or food	<b>0</b>	<b>12</b>
Proportion of women beneficiaries in leadership positions of project management committees	<b>60</b>	<b>21</b>

Source: SPR 2014

## 2.3. Factors Affecting the Results

### 2.3.1 Internal Factors

#### Implementation arrangements

160. At the time of the evaluation, WFP had signed 249 field level agreements (FLAs) with more than 110 Cooperating Partners (CPs) and other implementing partners for the implementation of the PRRO activities.<sup>152</sup> During 2014, there was an average of 125 active FLAs per month. Around 80 percent of the CPs are local and national Somali registered NGOs, and around 10 percent are international NGOs. Other implementing partners include government authorities in Somaliland. The use of local and national NGOs facilitates the operation and cooperation with beneficiaries at many levels, including language and familiarity of local customs. The experience and capacity of local and national NGOs however, vary greatly and the CO has expressed concern about their weak technical and financial capacity, which impacts the efficiency and effectiveness of the PRRO. In response, WFP provides technical support from both the CO and AO to

<sup>151</sup> Interview with gender staff

<sup>152</sup> In 2010 there were 110 active cooperating partners.



many of the local and national NGOs and government partners. This is a positive contribution of the operation in strengthening local capacity in general.

161. The FLAs are directly managed by the five AOs and two sub-offices<sup>153</sup> with supervision and technical support from the CO. Many of the FLAs signed with international NGOs are further mandated to local organizations as part of the agreements in order to promote local capacity development. It furthermore allows the PRRO to intervene in areas where WFP does not have direct access for supervision and where the capacity of local organizations for implementing PRRO activities is questionable. The practice of mandating to local organisations, furthermore, shows that CPs can manage a number of local implementing organizations. This justifies the CO's current plans to move towards signing umbrella agreements with a manageable number of NGOs with capacity to train and manage implementing organizations. With these new procedures, it is expected that the efficiency will be improved. However, it will be important to include the capacity development goals with outcome indicators in the arrangements.
162. The PRRO has strengthened the relationship with government and local administration for all activities, which has promoted the relevance and effectiveness of the activities. Moreover, the participation and collaboration with local authorities has allowed development of local capacity and further possibilities for continuation of the activities beyond the PRRO. During the evaluation, the ET noticed that local authorities' in the border area perceive the PRRO first and foremost for the asset creation, and the interest of local authorities in ensuring the continuation of the activities.
163. WFP's overall policy of promoting the role of women is sought in the implementation arrangements by promoting female recruitment. However, WFP as well as its partners are faced with continuous challenges in identifying female candidates for most local positions.

## **Monitoring & Evaluation System**

164. The CO has a well-developed and compliance-oriented M&E plan, Standard Operating Procedures (SOP), and strategy in line with WFP's corporate policy for results-oriented monitoring and evaluation framework. As such, the M&E plans are defined by the strategic plans and ensure the coherence between the PRRO and WFP's Strategic Plan. Through monthly monitoring reports, quarterly and annual donor reports, and annual SPRs, the system allows in principle a good tool for promoting efficiency and effectiveness. The SOP was approved in May 2014 and has since replaced guidance notes from 2012, which was a further development of guidance notes from 2009/10. During the evaluation, it was noted that the M&E plan is still not fully implemented particularly because of staff reductions and staff turnover.
165. A special challenge that still needs to be fully implemented is the integrated monitoring showing the interrelationships among the different activities and monitoring of critical delays. To counterbalance some of the immediate human resource challenges, the VAM unit is supporting the M&E unit, including specialized training of field monitors on mobile technology complementing the general training provided by the M&E unit.
166. The M&E system involves collection and analysis of indicator achievement data in relation to outputs, outcomes, processes, and crosscutting issues such as gender. The

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<sup>153</sup> Somaliland (Hergeisa AO and Berbera sub-office), Puntland (Bossaso AO and Garowe sub-office), Central (Galkayo AO), Border Area (south-west – Dolow AO), and Mogadishu (Mogadishu AO).

central M&E unit maintains a database<sup>154</sup> to track the coverage of monitoring activities, including monitoring activities with information on date, monitoring type, region, district and FDP, tonnage delivered, cooperating partner, and area of accessibility. While there is a centralized M&E unit at the level of CO and AOs responsible for implementing the M&E plan, the technical units, such as nutrition, undertake additional monitoring and might have different M&E databases than the centralized M&E unit for more detailed and sector specific input. From a purely sector point of view, it might be justified that each sector has its own system. This further allows each sector to develop additional sector specific indicators. However, such a system calls for harmonization and coordination to ensure data compatibility, which can be a challenge in a system with limited human resources. The ET observed various instances where there were discrepancies between the data from the technical sector databases and data from the central M&E database, including the SPR, for instance for data related to school meals. Likewise, the ET did not see mechanisms allowing for verifying data from different sources such as government data relevant for the results of the school meals programme.

167. Third party monitors are used systematically in AOs with serious access and security constraints, that is in Mogadishu, Dolow, and Galkayo.<sup>155</sup> The security situation at the office in Galkayo, however, means that it is also sometimes possible to use WFP's own monitors. Overall, there is satisfaction with the third party monitoring arrangement although some AO staff members express some concerns that there might be less commitment to the WFP mission among third party monitors, however the ET found no evidence of this. The ET did not see any initiative for an objective comparison of the work of the third party monitors compared to that of WFP recruited monitors. Still, it was noted that third party monitors are attached to specific AOs and do not necessarily understand the overall PRRO. So while the third party monitor company is recruited by the CO the individual third party monitors respond directly to the AOs.
168. Whereas, the strict and corporate specific M&E system applied is an enabling factor for the efficiency and effectiveness of the PRRO, the system has proven challenging for implementation in partnerships. So even though that the Joint Resilience Strategy has a joint M&E system, each partner is responsible to their own donors for their specific activities in the joint results framework. However, in 2014 the joint results from the joint M&E system were shared with one of the key donors, DFID. A critical challenge though remains as the current joint M&E framework does not include specific measures to address whether the livelihood activities such as food for assets implemented within the framework of the resilience strategy fare better than similar livelihood activities in other areas of the PRRO.

## **Feedback mechanisms**

169. One of the important components of the monitoring system is enabling feedback from beneficiaries and the community in general. This is done in part, through a telephone hotline. The CO established the hotline in 2010 as part of the relief activities, and it was re-invigorated in 2013, covering all PRRO operation sites. People can call the hotline and provide feedback directly to WFP about anything linked to their participation in the

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<sup>154</sup> In a strict technical sense, it might be argued that there is no M&E database (for instance similar to WINGS) but only spreadsheets.

<sup>155</sup> The use of third party monitors follows the guidelines for third party monitoring issued in 2014,<sup>155</sup> including background checks and training of monitors similar to training of WFP directly recruited monitors, both in terms of coverage and frequency.

PRRO, including the work of the third party monitors and the CPs.<sup>156</sup> While this is definitely a positive contribution to the overall transparency and accountability of the PRRO, the local culture and capacity for communities and households to claim their rights and hold WFP/CPs accountable has not been verified. While the CO reports good use of the hotline, the ET observed during the visits to the operation sites that many beneficiaries were not aware of the hotline or other feedback mechanisms. This might be linked to culture, gender and the power relations between the food distributor and beneficiary.

170. All hotline feedback is combined with information from post-distribution interviews with beneficiaries and analysed on a monthly basis and categorized according to their importance.

## **Risk Management**

171. WFP put in place an efficient risk management strategy for the PRRO for different implementation aspects which has enabled a smooth implementation in a dynamic and unpredictable environment. The ET has reviewed the different risk mitigation measures (Annex 10) and found that overall, the planned mitigation measures have been successfully applied promoting the efficiency of the PRRO. However, the ET finds that some of the measures could be more nuanced, for instance through systematic cost-benefit considerations for different mitigation alternatives. This would be the case for the 'more targeted interventions' planned to mitigate risks of food diversion that would require further assessments to be appropriate in different contexts. As such, the ET notes that cost-saving benefits using self-targeting might out-weigh the costs of some diversion.
172. The ET also notes that for a number of risks, the CO has developed and implemented additional risk mitigation measures, including the 'hot-line' for risk of fraudulent and mismanaged distribution of assistance. The ET considers, though, that for some risk mitigation measures it will be necessary to consider more carefully the full ramifications of the measures and the possibilities for its full application. Likewise, the full ramifications of the targeting used for school meals to limit inclusion risks is based on school children. However, in some areas parents have to buy school uniforms, which prevents the very destitute from sending the children to school, and therefore the most vulnerable are not being targeted for the intervention.
173. The ET also notes some of the risks associated with the use of cash-based transfers have been mentioned in the mitigation framework. However, other risks that were highlighted by WFP during the evaluation have not been included. These include the risks associated with using the network of informal money transfer agencies, and monitoring receipt of cash transfers through a mobile network.

## **Pipeline**

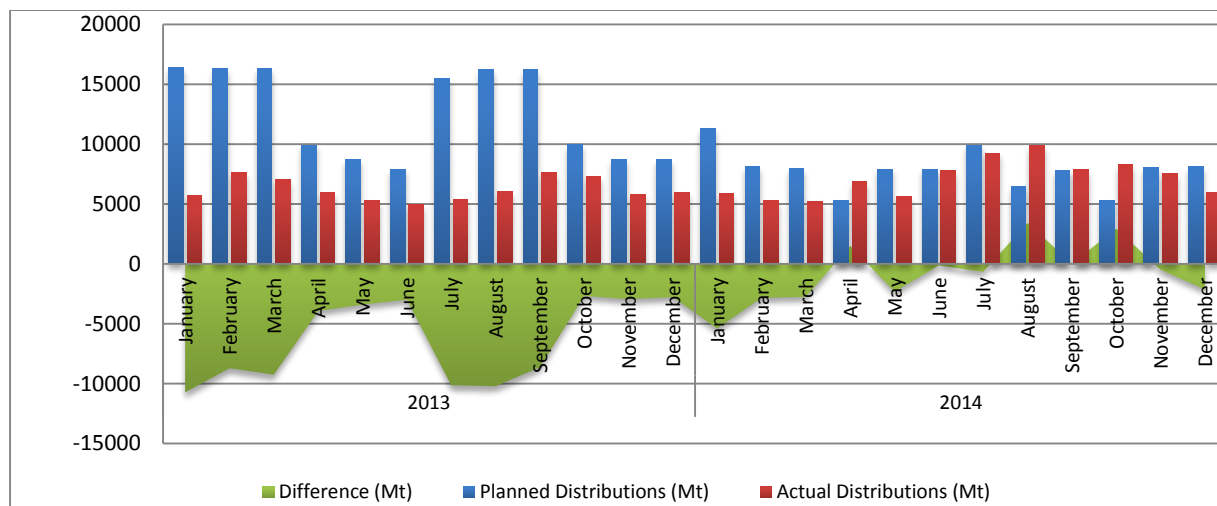
174. It is clear that pipeline issues have affected the implementation of the PRRO since the launch of the operation. Pipeline breaks have led to delays in distribution or substitution of specialized nutrition commodities, with CSB+.
175. The process for addressing pipeline breaks is laid out in the Standard Operating Procedures, and a contingency plan is clearly stated and comprehensively addresses the

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<sup>156</sup> WFP also invites the public to use the hotline for general reporting of suspicious activities such as fraudulent use of ration cards.

pipeline break scenarios. Figure 35 below shows the difference between the planned distributions and actual distribution of food assistance during the first two years of the PRRO. Throughout 2013, there was a constant shortfall, but the pipeline improved slightly during 2014.

**Figure 35: Planned vs. actual distribution in Mt in 2013 and 2014**



Source: WFP Somalia Country Office

176. WFP has explored various approaches to address the pipeline issue including local purchase in line with WFP’s corporate policy to support local farmers. In early 2014, 200 mt of cereals were purchased locally in Mogadishu and distributed successfully. In the second half of 2014, WFP was trying to purchase over 1,000 mt locally with produce from Lower Shabelle. However, the commodity was infected by aflatoxins and the local purchase had to be put on hold.

177. Pipeline breaks also affected the implementation of the nutrition treatment programs despite them being prioritized for supply. The supply of RUSF (*Plumpy’Sup*) whilst fairly reliable in 2013 has been erratic in 2014. Substitution of CSB+ and oil for RUSF occurred on average for 4 months of 2014. This has had direct programme implications. Importantly, the length of stay (LOS) to reach discharge criteria is significantly longer when using CSB+.<sup>157</sup> This has increased the number of non-responders in the programme, which is visibly observed on beneficiary cards but unrecorded.

178. Substitution of *Plumpy’doz* for children in MCHN also occurred for extended periods in 2014. This was due in part to funding but also issues with the commodities at the source. The use of CSB+/oil particularly at health facilities creates logistical challenges of storage and distribution and also results in overcrowding. The switching between rations leads to confusion and unmet expectations among beneficiaries. Some partners have their own buffer stocks of RUSF and have circumvented this issue. Pipeline breaks combined with earmarked funding have particularly affected rations for PLHIV and TB patients under treatment and in most cases partial or no ration has been available for extended periods (average 5-11 months). As such, the PRRO reports of instances where commodities are available but cannot be distributed to PLHIV and TB patients because of restrictions on funding source of the commodities. In addition to the intervention not achieving desired outcomes of nutritional rehabilitation and adherence to treatment, the highly sensitive nature of this intervention has placed partners on the front line at risk in

<sup>157</sup> Analysis of cards and program data at 6 sites in Somaliland and Puntland and Galkayo showed average LOS of 2 months with RUSF compared to 4 months with CSB+/oil.

the community.<sup>158</sup> In December 2014 no rations were available in any nutrition program leading to drop out in MCHN clinics and failure to admit children in TSFP.<sup>159</sup>

179. Finally, it should be noted that pipeline breaks have had negative effects on the school-feeding program. According to the headmasters at the schools visited by the ET, attendance data showed a general decline when meals are not served for several days. Likewise, non-availability of take home rations for girls based on their school attendance has been shown to be associated with lower attendance rates.

### **2.3.2. External Factors**

#### **Access**

180. Accessibility concerns have been a defining factor for coverage and outcomes of the PRRO. Restricted movement is not only an issue for WFP, but for other agencies working in Somalia, and for the population themselves. Planning and implementation is constantly challenged by fluidity and complexity of the situation where for instance some areas might be 'liberated' but they cannot be accessed because of road blockages. The complex political context and security concerns have also had negative effects on the supply pipeline. The tightened border security at the Kenya-Somalia border points as well as more domestic security concerns that restricted access to food distribution points triggered some delays in the delivery of supplies and one particularly serious pipeline break in cereals led to the suspension of new projects in South Somalia in the second half of 2014. Likewise limited access to 'newly accessible areas' with poor airstrips in South Somalia has limited the food supply in some areas to Ready to Use Food.

#### **Funding**

181. The funding limitation of a shortfall of 60 percent after two years of operation has had severe impacts on the coverage of the PRRO and led to prioritization of lifesaving activities over the much needed livelihood activities and the integrated resilience approach in general. Likewise, there has been some compromise on the prioritization of using cash-based transfer modalities, when unrestricted funding was low.
182. The United States is WFP Somalia's largest donor and is based on a recognition of WFP's clear comparative advantage for the provision of in-kind. Since 2010, FFP has had a policy of funding cash interventions in Somalia to increase the use of market-based interventions. As a result, in 2013, Food For Peace (FFP) provided US\$2.5 million for funded for cash-based activities in Mogadishu. However, by December 2013, WFP only had available funds for the planned cash and voucher activities until the end of January 2014, with shortfalls first appearing in February 2014.<sup>160</sup> Limited unrestricted funding was received after this period, seriously hampering any possibility of utilizing cash-based approaches. The limited unrestricted cash contributions that came in were given to the TSFP and BSFP programmes as priority, as these programmes required expensive specialized commodities.
183. Several donors are providing funding for cash-based interventions in Somalia but are reticent to provide funds to WFP due to concerns about their capacity to roll out larger cash and voucher operations in Somalia. It was noted, for instance, during the evaluation

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<sup>158</sup> Semi structured interviews with CP's operating PLHIV and TB programmes reported that issues with ration availability caused problems with local health authorities and in communities.

<sup>159</sup> Focal groups with PLW and mothers of registered children at 4 MCHN centres in Somaliland, Puntland and Galkayo noted they did not attend MCHN for one or more months in 2014 due to lack of availability of food ration.

<sup>160</sup> WFP (2013) WFP Somalia Operations Update. Dec 2013. Presentation to donors; WFP (2014) WFP Somalia Food Security and Nutrition Outlook. February 2014 ; WFP (2014) WFP Somalia Operations Update. August 2014. Presentation to donors

that several INGOs had received large donations for cash-based interventions during and after the 2011 famine.

## **Partnerships**

184. The PRRO has strengthened the relationship with government and local administration for all activities, which has promoted the relevance and effectiveness of the activities. Moreover, the participation and collaboration with local authorities has allowed development of local capacity and further possibilities for continuation of the activities beyond the PRRO.
185. WFP also works closely with other partners including UN agencies, and both local and international NGOs. The challenge of keeping national and local NGOs engaged was highlighted in a recent evaluation of the Somalia NGO Consortium. According to the evaluation, there is a general concern about the declining representation of INGOs in general in coordination structures.

## **Access to clean water**

186. The importance of access to potable water is recognized in all food security and nutrition analysis frameworks as critical for food and nutrition security, including WFP's corporate frameworks. Still, in most parts of Somalia, including operation sites visited by the ET in SCZ, the rivers provided the main source of water, and typically used untreated water. In addition, recent food security surveys in the urban areas in SCZ highlight that water represented up to 10 percent of average household expenditures<sup>161</sup> for surveyed households.
187. The lack of full integration of water access in the PRRO food and nutrition security activities most likely limits the efficiency, effectiveness, and sustainability. The finding about the limited attention to integrated approaches from the example of access to potable water highlights a general shortcoming in the PRRO design and implementation with effects on the efficiency and effectiveness of the operation, namely the lack of systematic programming according to the interrelationship among all activities. So while the PRRO in principle promotes an integrated approach, the relationship among the different components and activities is not clearly identified.

# **3. Conclusions and Recommendations**

## **3.1 Overall Assessment**

188. The PRRO followed WFP's well-developed monitoring system, including annual Standard Project Reports documenting results measured against targets. These primarily quantitative self-evaluation assessments were verified, analysed, and further explained through the evaluation's primarily qualitative approach focusing on the overall features of the PRRO approach.
189. The implementation of the PRRO was characterized by a flexible approach that incorporated both relief and recovery interventions. This was appropriate based on the different contexts in different locations. All the planned activities were also appropriate, based on the prevailing situation during the design phase, and the needs identified through assessments. Overall, the PRRO has effectively met the expected changes among the target group and has had high success rates for some activities in terms of reaching or surpassing the planned results, for instance for school meals, as well as for

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<sup>161</sup> See for instance, FEWSNET special report Beled-Zaawo, Gedo, Somalia - Urban Food Security Assessment -October 2014.

meeting the expectations of key stakeholders, such as livelihood activities, including training and community assets.

190. All the activities of the PRRO are coherent with WFP corporate strategy and align with the work of other humanitarian and development actors in Somalia. While there is limited joint programming with other UN agencies, the WFP activities were harmonized both at the planning stage as well as during implementation, through the appropriate clusters. Moreover, the resilience approach has improved coordination, alignment, and connectivity particularly in activities implemented within the Joint Resilience Strategy framework; as well as offering opportunities for integrated community interventions with a focus on strengthening self-reliance.
191. WFP has also appropriately included capacity development throughout the implementation of the PRRO. This is a critical part of the transition from relief to development and for enabling local institutions and local authorities.
192. An increased focus on integrated approaches, including MCHN clinics as central sites for integrated prevention and treatment programming and as a base for outreach have increased the effectiveness of the nutrition activities. However, functional MCHN clinics only exist in Somaliland and Puntland so even if the measure is effective where implemented, it cannot be transferred to SCZ for the time being.
193. WFP has successfully improved mobilization, outreach and effective case finding and follow up of moderately acute malnourished cases through its large network of community nutrition workers who have been trained. In nutrition this means a strong focus on addressing health and hygiene, care and feeding practices as the key determinants of acute malnutrition and stunting through effective interventions aimed to change practice. However, whilst attention was given to this in the design and early stages of the PRRO, it has not been sufficiently followed through in practice. Since many of the community health and nutrition cadre are affiliated with the MCHN centre, this is a critical aspect of an integrated programming.
194. While the beneficiaries generally appreciate the activities and results, the approach for identifying the overall activity mix in the operation consisted mainly of some community consultations in line with the WFP CBPP guidance to assess beneficiaries' appreciation of different but pre-defined responses. So while the activities meet the needs of the beneficiaries, they do not necessarily meet their priorities.
195. While the M&E system is well developed with a compliance-oriented M&E plan and SOP in line with WFP's corporate policy, staff reductions and staff turnovers have put some constraints on the effectiveness of the system. To counterbalance access challenges, the M&E effectively employ third party monitors. A special challenge that still needs to be fully addressed in the system is harmonization of monitoring databases prepared for sector purposes, for instance within the nutrition program. Likewise, the system still needs to assess impacts of different implementation modalities such as livelihood activities implemented under the Joint Resilience Strategy and develop integrated monitoring showing the interrelationships among the different activities and monitoring of critical delays.
196. Funding constraints and pipeline issues negatively impacted the efficiency and effectiveness of the operation. Substitution of ready to use therapeutic foods with less effective corn-soy blends also led to an increased time of recovery for malnourished children. These constraints also had a negative impact on the planned use of cash-based modalities. WFP have focused on voucher modalities, with which they were already

experienced, but which provide less flexibility for beneficiaries, and have a higher administrative burden for WFP. There is a broad consensus among partners and donors that cash-based modalities are appropriate in much of Somalia, and can be an effective and efficient way to implement a range of programme activities. Implementation through cash-based modalities rather than vouchers, would be more coherent with other actors in Somalia, and reflect the direction of the larger humanitarian community, including donors, in Somalia.

197. There is a general recognition at all levels of the PRRO that women and girls face greater and different challenges than men and boys for achieving sustainable livelihoods and food security. The operation has therefore effectively targeted women and girls for most activities and improved the attention to gender-disaggregated data in 2014. This has increased the potential for improved understanding of gender-based needs. However, comprehensive gender analysis, including regional differences and the dynamic aspects of gender roles still need to be considered. So far, no gender analysis has been carried out to inform the design and implementation of the PRRO activities and approaches. Moreover, the indicators applied in the M&E for gender sensitive approaches do not sufficiently address the gender-transforming role of the activities at local level.

### 3.2 Recommendations

**Recommendation 1: WFP Somalia should prioritize, revise and streamline their nutrition and health programming for maximum effectiveness and efficiency according to the context and limited resources.** Specifically, this evaluation has identified a number of nutrition and health activities that need to be discontinued, or modified.

- BSFP can be discontinued in Somaliland and Puntland.
- TSFP for acutely malnourished PLW can be discontinued in Somaliland and much of Puntland as MCHN often covers the same target group and the caseload is small. Malnourished PLW can be effectively screened, managed and monitored in the context of MCHN.
- The TSFP family ration can be discontinued in Somaliland and part of Puntland. Other options to address key causal factors for SAM and MAM should be considered, including reducing mothers' time and workload, and lack of household income. Using cash-based modalities and linking this target group to livelihood activities should be considered based on local capacity and access.
- The purpose of the PLHIV and TB intervention should be clearly defined as nutritional treatment and as such standard entry and exit criteria must be used. An appropriate ready to use food (RUF) as an individual ration is highly preferable, and consistent with national guidelines and the global guidance on NACS programming for PLHIV and TB.<sup>162</sup> The food-based household ration for this target group should be replaced with a cash-based transfer modality when access and local capacity will allow and is sufficient or can be properly developed.
- As other agencies such as UNICEF seek to pilot test non-food approaches to managing MAM, it is incumbent upon WFP to collaborate effectively to assess innovative and cost effective approaches in contexts where GAM rate is relatively low.

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<sup>162</sup> National Guidelines for Nutrition, Education, Counselling and Support (NECS) of PLHIV and TB Patients (Draft in progress May 2013). Nutrition Assessment Counselling and Support (NACS) for People Living with HIV and TB. September 2013. FANTA/AED. Available at <[www.fantaproject.org](http://www.fantaproject.org)>



**Recommendation 2: WFP Somalia should collaborate with MoH, local health authorities and UN partners under the joint mandate and JHNP to consolidate and scale up integrated programming at the MCHN.** Specifically, WFP should revise the following aspects of their programme to ensure that it is coherent with other agencies, and global best practice.

- Adopt the one common approach to programming and align treatment programmes (OTP and TSFP) and prevention programs at static and outreach /satellite sites.
- Streamline and revise FLAs in the second quarter of 2015 to ensure one partner operating in one site, where feasible.
- Ensure provision of essential drugs and supplies concurrent with the significant increase in use of maternal and child health services.
- Simplify and streamline recording and monitoring systems.
- Strengthen and consolidate community based behavioural change interventions aimed to address the key determinants of acute malnutrition and increase resilience.
- Scale up MCHN in SCZ following a thorough quarterly review to address issues in the pilot phase.
- Clearly determine impact of the MCHN programme through the planned impact assessment in 2015. This assessment should also identify barriers to access and integrated programming including unreported results. Sufficient budget for technical expertise should be allocated for this and the findings documented to contribute to the global evidence base.

**Recommendation 3: WFP Somalia should continue to provide food assistance to the most food insecure population groups based on food security assessments, but a greater emphasis should be placed on the use of alternative transfer modalities.** GFD should continue as an option under the ‘contingency activities’ but defined with clear exit strategies. Wet feeding should continue in urban centres in the South but exit strategies should be developed.

**Recommendation 4: In collaboration with FAO and UNICEF, WFP Somalia should continue to develop and implement appropriate community resilience approaches.** The approach should not only focus on protecting livelihoods but on improving livelihood opportunities, increasing community capacity and building resilience at all levels. This should be coordinated with other resilience initiatives in Somalia, including SomRep and the Informal Humanitarian Donor Group (IHDG) working on resilience.

**Recommendation 5: WFP Somalia should collaborate with UNICEF to ensure that School Feeding makes a contribution to educational outcomes.** This includes assessments of enrolment, attendance and any other impact the activity makes to education in Somalia. The comparative advantage of the current take-home-rations compared to alternative measures for promoting girls’ enrolment should form the basis for the School Feeding activities in the next PRRO. Moreover, the School Feeding component should include mechanisms to ensure that children from the most destitute households will be able to attend school.

**Recommendation 6: WFP Somalia should address identified capacity gaps in a number of sectors including nutrition and health, the use of cash-based modalities, and gender analysis.** The ET therefore recommends that WFP Somalia develop a comprehensive capacity development strategy. This strategy should be based on capacity needs assessments and with monitoring indicators showing the specific capacity aspects to be increased. The capacity development strategy should

not only address government counterparts but increase identification and integration of alternative community governance structures. Furthermore, the capacity development strategy should address WFP Somalia's internal capacity needs.

- **Nutrition and Health:** It is essential that WFP invest in its own technical capacity in the health and nutrition sector in order to fully engage and provide leadership on policy, strategy and coordination in Somalia and to ensure effective programme implementation. Specifically this will require investing in long-term technical capacity at senior management level as well as at AO level. This technical leadership will also enable WFP to address persistent issues with Letter of Understanding (LOUs), FLA contracts, the development of a phased handover strategy with government and leveraging funding for nutrition programming with major donors. Good technical leadership will also address programmatic issues currently hampered by policy constraints including the need for revision of national guidelines for IMAM.
- **The use of cash-based transfer modalities:** The CO should work with the Regional Bureau and/or WFP HQ to strengthen the capacity of WFP and CPs in cash-based transfer modalities.
- **Gender analysis:** The CO should strengthen its gender analysis capacity, including through recruitment of a gender consultant and a full-time gender expert. This will maximize gender impacts during the last months of implementation of the current PRRO while ensuring the next PRRO will be based on sound gender analysis and with additional specific indicators to monitor gender impact at community level.

**Recommendation 7: WFP Somalia, together with HQ, should develop a fundraising strategy to enable programming to be implemented as planned.** The strategy should include focus on funds available for cash-based approaches to be more effectively utilised across multiple sectors.

**Recommendation 8: WFP Somalia should continue using a flexible approach that links relief and recovery, while strengthening community resilience in the next PRRO.** The overall country strategy should also be aligned with the New Deal Compact and the strategies of other humanitarian and development agencies working in Somalia.

**Recommendation 9: WFP Somalia should ensure further development of the M&E system to ensure greater attention to its usefulness for planning and management purposes.** Indicators should be developed to support the strengthening of an integrated approach, as well as indicators allowing for the assessment of impacts of different implementation modalities such as livelihood activities implemented under the Joint Resilience Strategy. Moreover, the M&E system should develop compatible and easily accessible databases to promote optimal use of monitoring and evaluation for planning and management purposes.

## Annexes

### Annex 1: Terms of Reference



## EVALUATION QUALITY ASSURANCE SYSTEM

Office Of Evaluation

*Measuring Results, Sharing Lessons*

[FINAL, 20<sup>TH</sup> AUGUST 2014]

### TERMS OF REFERENCE

### OPERATION EVALUATION

### SOMALIA PROTRACTED RELIEF AND RECOVERY OPERATION (200433) STRENGTHENING FOOD AND NUTRITION SECURITY AND ENHANCING RESILIENCE

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## 1. Introduction

1. These Terms of Reference (TOR) are for the evaluation of PRRO 200443 - Strengthening food and nutrition security and enhancing resilience in Somalia. This evaluation is commissioned by the WFP Office of Evaluation (OEV) and will commence with preparation in August 2014, with the field mission in mid-October and the final report in February 2015. In line with WFP's outsourced approach for operations evaluations (OpEvs), the evaluation will be managed and conducted by an external evaluation company amongst those having a long-term agreement with WFP for operations evaluations.

2. These TOR were prepared by the OEV focal point based on an initial document review and consultation with stakeholders and following a standard template. The purpose of the TOR is twofold: 1) to provide key information to the company selected for the evaluation and to guide the company's evaluation manager and team throughout the evaluation process; and 2) to provide key information to stakeholders about the proposed evaluation.

3. The TOR will be finalised based on comments received on the draft version and on the agreement reached with the selected company. The evaluation shall be conducted in conformity with the TOR.

## 2. Reasons for the Evaluation

### 2.1. Rationale

4. In the context of renewed corporate emphasis on providing evidence and accountability for results, WFP has committed to increase evaluation coverage of operations and mandated OEV to commission a series of Operations Evaluations (OpEvs) in 2013 -2015.

5. Operations to be evaluated are selected based on utility and risk criteria.<sup>163</sup> From a shortlist of operations meeting these criteria prepared by OEV, the Regional Bureau (RB) has selected, in consultation with the Country Office (CO) PRRO 200443- strengthening food and nutrition security and enhancing resilience in Somalia- for an independent evaluation. In particular, the evaluation has been timed to ensure that findings can feed into the decisions on the design of the next programme.

### 2.2. Objectives

6. This evaluation serves the dual and mutually reinforcing objectives of accountability and learning:

- **Accountability** – The evaluation will assess and report on the performance and results of the operation. A management response to the evaluation recommendations will be prepared.
- **Learning** – The evaluation will determine the reasons why certain results occurred or not to draw lessons, derive good practices and pointers for learning. It will provide evidence-based findings to inform operational and strategic decision-making. Findings will be actively disseminated and lessons will be incorporated into relevant lesson sharing systems.

### 2.3. Stakeholders and Users

7. **Stakeholders.** A number of stakeholders both inside and outside of WFP have interests in the results of the evaluation and many of these will be asked to play a role in the evaluation process. Table one below provides a preliminary stakeholders' analysis, which will be deepened by the evaluation team in the inception package.

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<sup>163</sup> The utility criteria looked both at the timeliness of the evaluation given the operation's cycle and the coverage of recent/planned evaluations. The risk criteria was based on a classification and risk ranking of WFP COs taking into consideration a wide range of risk factors, including operational and external factors as well as COs' internal control self-assessments.

**Table 1: Preliminary stakeholders' analysis**

<b>Stakeholders</b>	<b>Interest in the evaluation</b>
<b>INTERNAL STAKEHOLDERS</b>	
<b>Country Office (CO)</b>	Responsible for the country level planning and operations implementation, the CO is the primary stakeholder of this evaluation. It has a direct stake in the evaluation and an interest in learning from experience to inform decision-making. It is also called upon to account internally as well as to its beneficiaries, partners for the performance and results of its operation.
<b>Regional Bureau (RB) Nairobi</b>	Responsible for both oversight of COs and technical guidance and support, the RB management has an interest in an independent account of the operational performance as well as in learning from the evaluation findings to apply this learning to other country offices.
<b>Office of Evaluation (OEV)</b>	OEV is responsible for commissioning OpEvs over 2013-2015. As these evaluations follow a new outsourced approach, OEV has a stake in ensuring that this approach is effective in delivering quality, useful and credible evaluations.
<b>WFP Executive Board (EB)</b>	The WFP governing body has an interest in being informed about the effectiveness of WFP operations. This evaluation will not be presented to the EB but its findings will feed into an annual synthesis of all OpEvs, which will be presented to the EB at its November session.
<b>EXTERNAL STAKEHOLDERS</b> (see Table 2 for a list of external stakeholders)	
<b>Beneficiaries</b>	As the ultimate recipients of food assistance, beneficiaries have a stake in WFP determining whether its assistance is appropriate and effective. As such, the level of participation in the evaluation of women, men, boys and girls from different groups will be determined and their respective perspectives will be sought.
<b>Government</b>	The transition federal government and the authorities in Somaliland and Puntland have (including their ministries of health and education) a direct interest in knowing whether WFP activities in the country are aligned with their priorities, harmonised with the action of other partners and meet the expected results. This is because they are key partners, not just in the implementation of the activities but in planning and developing the assistance strategies.
<b>UN Country team</b>	The UNCT's Somali Assistance Strategy (UNSAS) provides a five-year framework for the UN's development work as well as the humanitarian, transitional and recovery assistance. 20 UN agencies, funds and programmes are operating across Somaliland to help the authorities deliver social services, to protect and improve people's livelihoods and to support the Somaliland's government institutions to lead their development efforts. The UNCT has therefore an interest in ensuring that WFP operation is effective in contributing to the UN concerted efforts.
<b>NGOs</b>	NGOs are WFP's partners for the implementation of some activities while at the same time having their own interventions. The results of the evaluation might affect future implementation modalities, strategic orientations and partnerships.
<b>Donors</b>	WFP operations are voluntarily funded by a number of donors. They have an interest in knowing whether their funds have been spent efficiently and if WFP's work has been effective and contributed to their own strategies and programmes.

**8. Users.** The primary users of this evaluation will be:

- The CO and its partners in decision-making related notably to the implementation of the current programme as well as the design of the next programme.
- Given RB's core functions the RB is expected to use the evaluation findings to provide strategic guidance, programme support and oversight,
- OEV will use the evaluation findings to feed into an annual synthesis of all OpEvs and will reflect upon the evaluation process to refine its OpEv approach, as required.

- The secondary users of the evaluation findings will include partners, especially FAO and UNICEF with whom WFP has joint strategy to enhance resilience, as well as the Government authorities

### 3. Subject of the Evaluation

9. Somalia is one of the poorest and most food-insecure countries in the world, with some of the worst development indicators-Life expectancy is estimated at 49.7 years; Infant and child mortality rates stand at 108.4 and 178 per 1,000 live births, respectively; only 29% of the population has access to improved water sources (only 9% in rural areas) and 23% to improved sanitation facilities (6% in rural areas); and adult literacy rate is 24%. The prolonged conflict, protracted crisis and insecurity in Somalia over more than two decades have caused enormous damage to the human livelihoods and social indicators. The provision of social services such as health, education, water, sanitation, food and nutrition has considerably deteriorated. Extended families and clans are the major social safety nets in the country, with remittances received from Somalis abroad estimated to provide up to 40% of household income. In the 2012 UN Human Development report, Somalia was ranked 165 out of 170 countries.<sup>164</sup> Of the population of 7.5 million, 43 percent live on less than US\$1 per day. Somalia has not had a functioning central government since 1991. Somaliland and Puntland have lower levels of vulnerability as a result of greater stability and improved governance. In SCZSCZ, 89 percent of people are poor across several dimensions, compared to 75 percent in Puntland and 72 percent in Somaliland.<sup>165</sup> Gender inequality is alarmingly high at 0.776 out of a value of 1, with Somalia at the fourth lowest position globally on the Gender Inequality Index. Women suffer severe exclusion and inequality in all dimensions -health, employment and labour market participation.<sup>166</sup>

10. During the implementation of the emergency operation (EMOP 200281) between 2011 and 2012, WFP started a shift from life-saving relief assistance—primarily general food distributions—towards recovery assistance that enables communities to cope more effectively with hardships. Targeting a total of 2.9 million beneficiaries over the three years, the PRRO 200443 continues this shift with two overarching objectives: to enhance resilience in communities and households affected by recurrent shocks, and to ensure that WFP can continue to save lives in emergencies and protect livelihoods. WFP targets vulnerable pastoralists, agro-pastoralists, internally displaced persons (IDPs) and urban poor by: a) enhancing medium-term and long-term resilience in vulnerable communities through food-for-assets (FFA) interventions and complementary activities through increased engagement with stakeholders; b) rebuilding food and nutrition security in households affected by shocks through nutrition activities, school meals and FFA interventions; and c) protecting livelihoods during shocks and seasonal vulnerabilities through nutritional support and targeted relief, as appropriate.

11. The project document including the logframe, related amendments (Budget revisions) and the latest resource situation are available by clicking [here](#).<sup>167</sup> The key characteristics of the operation are outlined in table two below:

**Table 2: Key characteristics of the operation**

OPERATION	
Approval	The operation was approved by the Executive Board in November 2012

<sup>164</sup> African Development Bank, COUNTRY BRIEF 2013-2015

<sup>165</sup> <http://www.so.undp.org/content/somalia/en/home/countryinfo/>; accessed on 22<sup>nd</sup> July 2014

<sup>166</sup> UNDP Somalia Human Development Report 2012, Empowering Youth for Peace and Development

<sup>167</sup> From WFP.org – Countries – Somalia– Operations.

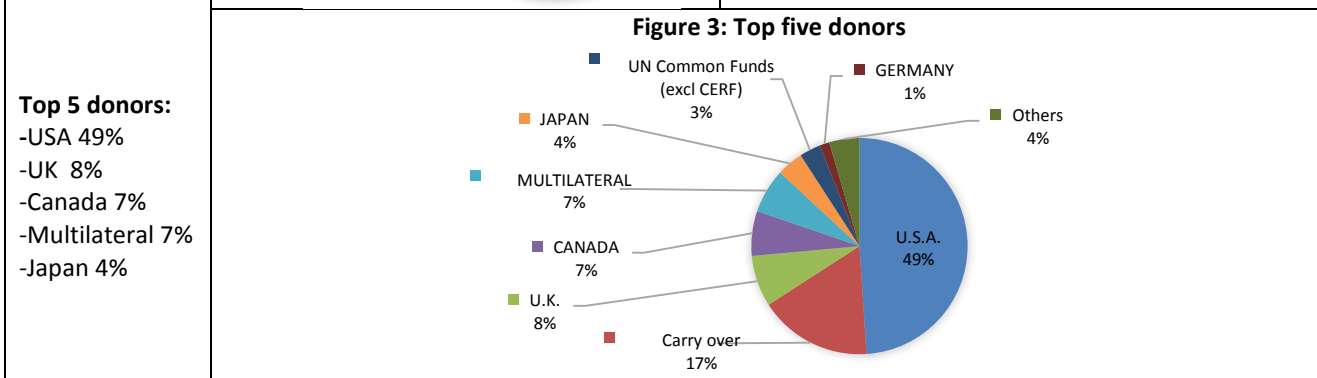
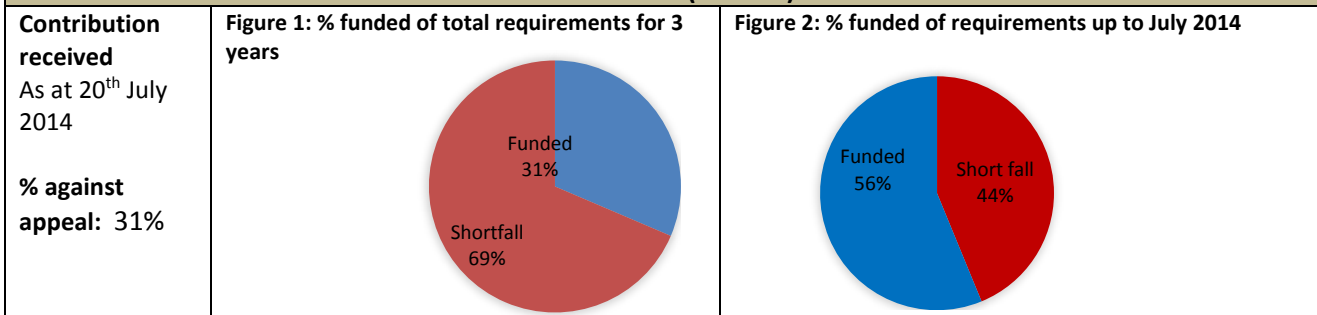
<b>Amendments</b>	There have been two amendments/budget revisions (BR) to the initial project document. BR1 which was approved in May 2013, increased the landside transport, storage and handling rate from 307.86 per mt to 425.07 per mt, resulting to an increase in the overall budget by 54 million (6%). BR2, which was approved in July 2014 decreased the number of planned beneficiaries for 2014 by 15.2%, in view of improved food security situation; increased cash and voucher costs by 15%; increased capacity development costs by 64% and transferred security-related costs to a special operation. This reduced the overall PRRO budget by 51.1 million (6%).	
<b>Duration</b>	<b>Initial:</b> 3 years (Jan 2013–Dec 2015)	<b>Revised:</b> N/A
<b>Planned beneficiaries</b>	<b>Initial:</b> <b>2013:</b> 1,560,000; <b>2014:</b> 1,584,000; <b>2015:</b> 1,605,000 <b>Total:</b> 2,874,000	<b>Revised:</b> <b>2013:</b> 1,560,000; <b>2014:</b> 1,342,500; <b>2015:</b> 1,605,000 <b>Total:</b> 2,874,000
<b>Planned food requirements</b>	<b>Initial:</b> In-kind food: 498,069 mt of food commodities Cash and vouchers: US\$42 Million Capacity Development: US\$1.5 million	<b>Revised:</b> In-kind food: 443,607 mt of food commodities Cash and vouchers: US\$55.9 million Capacity Development: US\$2.5 million
<b>US\$ requirements</b>	<b>Initial:</b> 862,886,857	<b>Revised:</b> 866,365,430
<b>OBJECTIVES, OUTCOMES AND ACTIVITIES</b>		
<b>WFP Strategic Objectives</b>	<b>PRRO specific objectives and outcomes</b>	<b>Activities</b>
<b>SO 1-</b> Save lives and protect livelihoods in emergencies	<b>Protecting livelihoods during shocks and seasonal vulnerabilities</b>	
	<b>Outcome 1.1</b> Stabilized acute malnutrition in children under 5 in targeted areas	-Blanket supplementary feeding (seasonal)
	<b>Outcome 1.2</b> Improved food consumption over assistance period for targeted households	-Cash/Food for assets -Relief (cash/food)
<b>SO 2-</b> Prevent acute hunger and invest in disaster preparedness and mitigation measures	<b>Enhancing medium-term and long-term resilience in vulnerable communities through increased engagement with stakeholders</b>	
	<b>Outcome 2.1</b> Early-warning systems, contingency plans and food security monitoring systems put in place and enhanced with WFP capacity-development support	-Cash/food for assets (C/FFA) -Food for training (FFT) <i>(only targeting areas that are targeted by FAO/UNICEF)</i>
	<b>Outcome 2.2</b> Hazard risk reduced in targeted communities	
<b>SO 3-</b> Restore and rebuild lives and livelihoods in post-conflict, post-disaster or transition situations	<b>Rebuilding food and nutrition security in households affected by shocks</b>	
	<b>Outcome 3.1</b> Enrolment for girls and boys, including IDPs and refugees, in assisted schools stabilized at pre-crisis levels	-Cash/food for assets -Food for training -MNCH (including preventive health and nutrition)
	<b>Outcome 3.2</b> Reduced acute malnutrition in targeted populations	-School meals, including cash/food incentives for girls to enhance attendance
	<b>Outcome 3.3</b> Improved nutritional recovery of ART and TB clients	-TB/HIV nutrition -Institutional feeding
	<b>Outcome 3.4</b> Increased access to productive assets	
<b>SO 5-</b> Strengthen the capacities of countries to reduce hunger, including through hand-over strategies and local purchase <sup>168</sup>	<b>Outcome 5.1</b> Progress made towards government-owned hunger solutions	Training government counterparts in programme design, planning, oversight and implementation
<b>PARTNERS</b>		
<b>Government</b>	Ministry of health; Ministry of education, Ministry of civil aviation, Ministry of Environment, wildlife and tourism, Puntland highway authority	
<b>United Nations</b>	UNICEF and FAO on food security; UNICEF on education; UNICEF and WHO on health; Food security and Nutrition Analysis Unit (FSNAU); UNHCR on refugees and IDPs	

<sup>168</sup> There was no explicitly stated PRRO objective as far as Strategic objective 5, but capacity building intents are implicit in the document; furthermore, the second budget revision increased the resources allocated for capacity development activities. The overarching intentions/objective of the WFP Somalia in this will have to be explicated during the interviews with key staff, and the reflected accordingly when analyzing overall achievement of objectives

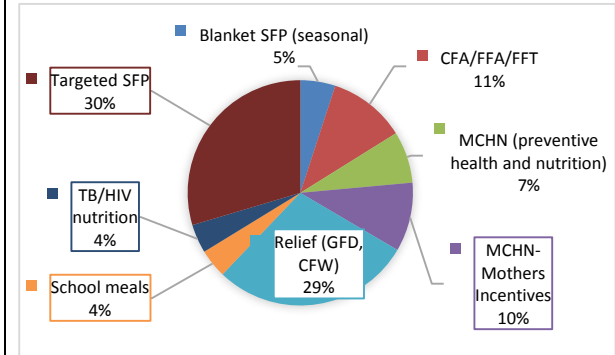
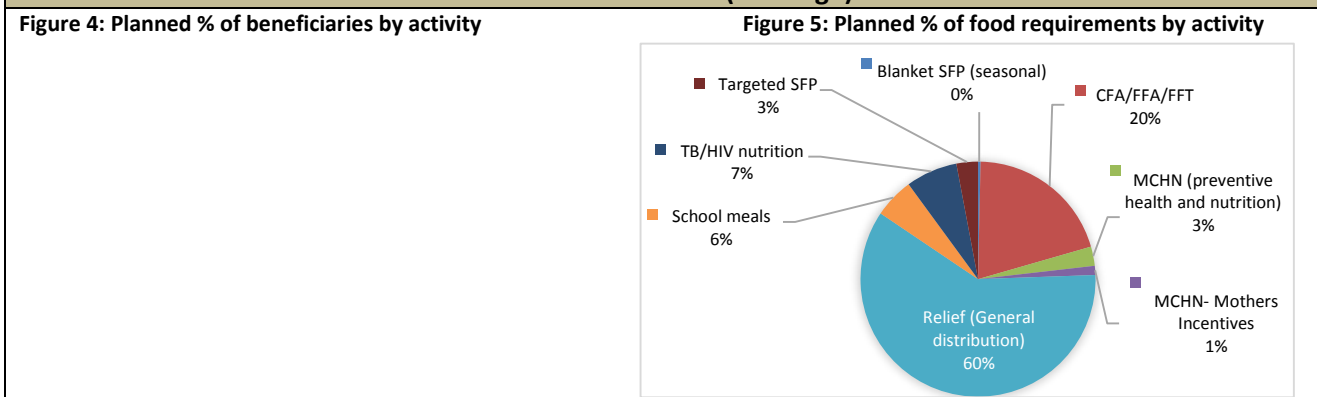


**NGOs** | 20 international NGOs, Over 100 national NGOs and the Somalia Red Crescent society<sup>169</sup>

**RESOURCES (INPUTS)**



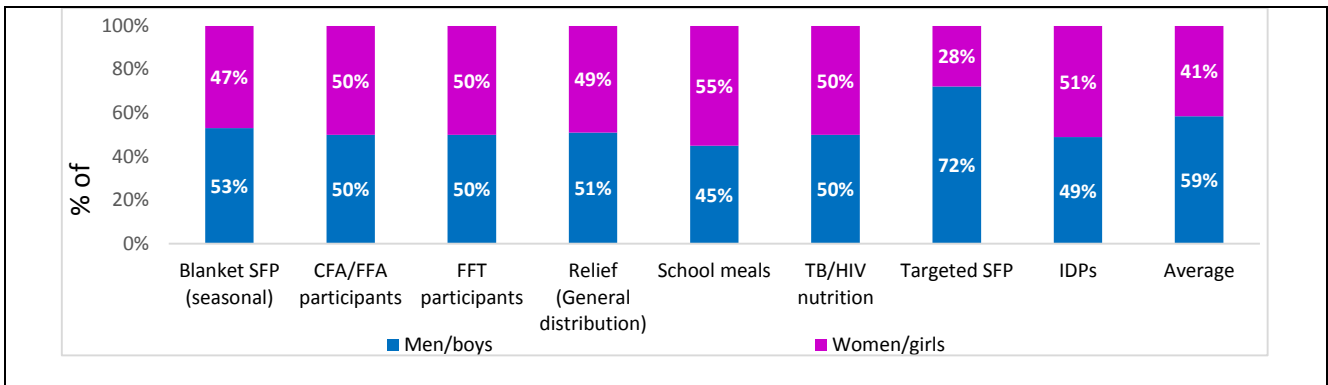
**PLANNED OUTPUTS (at design)**



**Figure 6: Planned % of women/girls versus men/boys by activity<sup>170</sup>**

<sup>169</sup> <https://mobile.wfp.org/+CSCO+0h756767633A2F2F74622E6A73632E626574+/web/ngo/partnership-statistics-and-publications>, accessed on 28<sup>th</sup> July 2014

<sup>170</sup> **Source:** 2013 SPRs. The project document does not have a breakdown of beneficiaries by sex, and the way the activities are reported in the SPR is slightly different from the project document. As such the activities listed here are different from those listed under bens and mts



## 4. Evaluation Approach

### 4.1. Scope

12. **Scope.** The evaluation will cover PRRO 200443 including all activities and processes related to its formulation, implementation, resourcing, monitoring, evaluation and reporting relevant to answer the evaluation questions. The period covered by this evaluation captures the time from the formulation of the operation (June to December 2012) and the period from the beginning of the operation until the start of the evaluation (January 2013 to October 2014). While covering the formulation period will be important in understanding the design context, the focus will be the on the implementation period.

### 4.2. Evaluation Questions

13. The evaluation will address the following three questions:

**Question 1: How appropriate is the operation?** Areas for analysis will include the extent to which the objectives, targeting, choice and combination of activities; and of transfer modalities:

- Were appropriate at project design stage to the needs of the food insecure population including the distinct needs of women, men, boys and girls from different groups, as applicable, and remained so over time.
- Are coherent with relevant stated Government policies, including sector policies and strategies (where these exists and are appropriate to the needs of the people, otherwise coherence in regard to other relevant strategies by civil society and other key players in Somalia) and seek complementarity with the interventions of relevant humanitarian and development partners
- Were coherent at project design stage with WFP strategies, policies and normative guidance and remained so over time.
- Are there opportunities for streamlining/simplifying/re-organising activities to achieve better coherence and complementarity with other stakeholders, including donors, UN agencies and civil society?

**Question 2: What are the results of the operation?** While ensuring that differences in benefits between women, men, boys and girls from different groups are considered, the evaluation will analyse:

- The level of attainment of the planned outputs (including the number of beneficiaries served disaggregated by women, girls, men and boys);
- The extent to which the outputs led to the realisation of the operation objectives as well as to unintended effects highlighting, as applicable, differences for different groups, including women, girls, men and boys;

- How different activities of the operation dovetail and are synergetic with other WFP operations and with what other actors are doing to contribute to the overriding WFP objective in the country; and
- The efficiency of the operation and the likelihood that the benefits will continue after the end of the operation.

**Question 3: Why and how has the operation produced the observed results?** The evaluation should generate insights into the main internal and external factors that caused the observed changes and affected how results were achieved. The inquiry is likely to focus, amongst others, on:

- Internally (factors within WFP's control): the processes, systems and tools in place to support the operation design, implementation, monitoring/evaluation and reporting; the governance structure and institutional arrangements (including issues related to staffing, capacity and technical backstopping from RB/HQ); the partnership and coordination arrangements; etc.
- Externally (factors outside WFP's control): the external operating environment; the funding climate; external incentives and pressures; etc.

### 4.3 Evaluability Assessment

14. Evaluability is the extent to which an activity or a programme can be evaluated in a reliable and credible fashion. The below provides a preliminary evaluability assessment, which will be deepened by the evaluation team in the inception package. The team will notably critically assess data availability and take evaluability limitations into consideration in its choice of evaluation methods. In doing so, the team will also critically review the evaluability of the gender aspects of the operation, identify related challenges and mitigation measures.

15. In answering question one, the team will be able to rely on assessment reports, minutes from the project review committee, the project document and logframe, evaluations or reviews of ongoing and past operations, including the Somalia country portfolio evaluation of (CPE 2012) as well as documents related to government and interventions from other actors. In addition, the team will review relevant WFP strategies, policies and normative guidance. In addition, the refugees operation in Kenya that hosts over half a million refugees from Somalia was evaluated in 2014 and it will be of relevance when considering issues related to food security and insecurity.

16. For question two the operation has been designed in line with the corporate strategic results framework (SRF) and selected outputs, outcomes and targets are recorded in the logframe.<sup>171</sup> Monitoring reports as well as annual standard project reports (SPRs) detail achievement of outputs and outcomes thus making them evaluable against the stated objectives.

17. However, answering question two is likely to pose some challenges owing in part to: i) Limited data on outcomes-due in part to more focus on compliance reporting than outcome monitoring in the recent past- which will require heavily relying on qualitative data to arrive at conclusions of achievement ii) the absence of baseline data for some of the activities, which will need to be reconstructed using findings from various assessment reports and iii) data gaps in relation to efficiency iv) Outputs data collected by third parties, thus limiting verification in case of validity issues

18. For question three, the team members will have access to some institutional planning documents and is likely to elicit further information from key informant interviews.

19. Security in Somalia is volatile, and access to some of the project sites may be limited. The extent of access will be discussed and agreed between the evaluation team and the country office during the inception period.

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<sup>171</sup> At the design of the operation in 2012/2013, the alignment 3 was with the strategic results framework (2008-2013). In 2014, the operation was aligned to the new strategic results framework (2014-2017). As such, the results for 2013 and those for 2014 should be reviewed based on the appropriate framework.

## 4.4. Methodology

20. The methodology will be designed by the evaluation team during the inception phase. It should:

- Employ relevant internationally agreed evaluation criteria including those of relevance, coherence (internal and external), coverage, efficiency, effectiveness, impact, sustainability (or connectedness for emergency operations);
  - Use applicable standards (e.g. SPHERE standards);
  - Demonstrate impartiality and lack of biases by relying on a cross-section of information sources (e.g. stakeholder groups, including beneficiaries, etc.) and using mixed methods (e.g. quantitative, qualitative, participatory) to ensure triangulation of information through a variety of means. Participatory methods will be emphasised with the main stakeholders, including the CO. The selection of field visit sites will also need to demonstrate impartiality.
  - Be geared towards addressing the key evaluation questions taking into account the evaluability challenges, the budget and timing constraints;
- Be based on an analysis of the logic model of the operation and on a thorough stakeholders analysis;
  - Ensure through the use of mixed methods that women, girls, men and boys from different stakeholder groups participate and that their different voices are heard and used;
  - Be synthesised in an evaluation matrix, which should be used as the key organizing tool for the evaluation.

## 4.5. Quality Assurance

21. OEV's Evaluation Quality Assurance System (EQAS) defines the quality standards expected from this evaluation and sets out processes with in-built steps for quality assurance, templates for evaluation products and checklists for the review thereof. It is based on the UNEG norms and standards and good practice of the international evaluation community (DAC and ALNAP) and aims to ensure that the evaluation process and products conform to best practice and meet OEV's quality standards. EQAS does not interfere with the views and independence of the evaluation team.

22. At the start of the evaluation, OEV will orient the evaluation manager on EQAS and share related documents. EQAS should be systematically applied to this evaluation and the evaluation manager will be responsible to ensure that the evaluation progresses in line with its process steps and to conduct a rigorous quality control of the evaluation products ahead of their submission to WFP. OEV will also share an Orientation Guide on WFP and its operations, which provides an overview of the organization.

## 5. Phases and deliverables

23. The evaluation will proceed through five phases. Annex two provides details of the activities and the related timeline of activities and deliverables.

24. **Preparation phase** (July 20<sup>th</sup> to September 20<sup>th</sup>): The OEV focal point will conduct background research and consultation to frame the evaluation; prepare the TOR; select the evaluation team and contract the company for the management and conduct of the evaluation.

25. **Inception phase** (September 22<sup>nd</sup> to October 19<sup>th</sup>): This phase aims to prepare the evaluation team for the evaluation phase by ensuring that it has a good grasp of the expectations for the evaluation and a clear plan for conducting it. The inception phase will include a desk review of secondary data and initial interaction with the main stakeholders.

<p><b>Deliverable: Inception Package.</b> The Inception Package details how the team intends to conduct the evaluation with an emphasis on methodological and planning aspects. The package will be approved by OEV and shared with the CO/RB for information. It will present an analysis of the context and of the operation, the evaluation methodology articulated around a deepened evaluability and stakeholders' analysis; an evaluation matrix; and the sampling technique and data collection tools. It will also present</p>
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the division of tasks amongst team members as well as a detailed schedule for stakeholders' consultation. For more details, refer to the [content guide for the inception package](#).

**26. Evaluation phase** (November 2<sup>nd</sup> to 22<sup>nd</sup>): The fieldwork will span over three weeks and will include visits to project sites and primary and secondary data collection from local stakeholders. Before commencing the mission, the team will spend the first day (3<sup>rd</sup> November) in security briefings as per requirements discussed in section 6.4. Two debriefing sessions will be held upon completion of the field work. The first one will involve the country office (relevant RB and HQ colleagues will be invited to participate through a teleconference) and the second one will be held with external stakeholders.

**Deliverable: Aide memoire.** An aide memoire of preliminary findings and conclusions (PowerPoint presentation) will be prepared to support the de-briefings.

**27. Reporting phase** (November 24<sup>th</sup> to February 28<sup>th</sup>): The evaluation team will analyse the data collected during the desk review and the field work, conduct additional consultations with stakeholders, as required, and draft the evaluation report. It will be submitted to the evaluation manager for quality assurance. Stakeholders will be invited to provide comments, which will be recorded in a matrix by the evaluation manager and provided to the evaluation team for their consideration before report finalisation.

**Deliverable: Evaluation report.** The evaluation report will present the findings, conclusions and recommendations of the evaluation in a concise report of 40 pages maximum. Additional information that will be deemed useful to stakeholders may be presented in annexes, in a format that will be easily accessible. Findings should be evidence-based and relevant to the evaluation questions. Data will be disaggregated by sex and the evaluation findings and conclusions will highlight differences in performance and results of the operation for different beneficiary groups as appropriate. There should be a logical flow from findings to conclusions and from conclusions to recommendations. Recommendations will be limited in number, actionable and targeted to the relevant users. These will form the basis of the WFP management response to the evaluation. For more details, refer to the [content guide for the evaluation report](#).

**28. Follow-up and dissemination phase:** OEV will share the final evaluation report with the CO and RB. The CO management will respond to the evaluation recommendations by providing actions that will be taken to address each recommendation and estimated timelines for taking those actions. The RB will coordinate WFP's management response to the evaluation, including following up with country offices on status of implementation of the actions. OEV will also subject the evaluation report to an external post-hoc quality review to report independently on the quality, credibility and utility of the evaluation in line with evaluation norms and standards. A feedback online survey on the evaluation will also be completed by all stakeholders. The final evaluation report will be published on the WFP public website, and findings incorporated into an annual synthesis report, which will be presented to WFP's Executive Board for consideration. Findings will be disseminated and lessons will be incorporated into other relevant lesson sharing systems.

**Notes on the deliverables:**

The inception package and evaluation reports shall be written in English and follow the EQAS templates. The evaluation team is expected to produce written work that is of very high standard, evidence-based, and free of errors. The evaluation company is ultimately responsible for the timeliness and quality of the evaluation products. If the expected standards are not met, the evaluation company will, at its own expense, make the necessary amendments to bring the evaluation products to the required quality level. The evaluation TOR, report and management response will be public and posted on the WFP External Website ([wfp.org/evaluation](http://wfp.org/evaluation)). The other evaluation products will be kept internal.

**Table 3: Key dates for field mission and deliverables** (see detailed timeline in annex 2)

Entity responsible	Phase	Activities	Key dates
EM	Inception	Final Inception Package	19 <sup>th</sup> October 2014
CO/ET	Evaluation	Evaluation field mission	2 <sup>nd</sup> to 22 <sup>nd</sup> November 2014
ET	Evaluation	Aide memoire	20 <sup>th</sup> November 2014
EM	Reporting	Draft Evaluation Report	20 <sup>th</sup> December 2014
EM	Reporting	Final Evaluation Report	15 <sup>th</sup> February 2015
CO/RB	Follow-up	Management Response	28 <sup>th</sup> February 2015

## 6. Organization of the Evaluation

### 6.1 Outsourced approach

29. Under the outsourced approach to OpEvs, the evaluation is commissioned by OEV but will be managed and conducted by an external evaluation company having a long-term agreement (LTA) with WFP for operations evaluation services.

30. The company will provide an evaluation manager (EM) and an independent evaluation team (ET) in line with the LTA. To ensure a rigorous review of evaluation deliverables, the evaluation manager should in no circumstances be part of the evaluation team.

31. The company, the EM and the ET members will not have been involved in the design, implementation or M&E of the operation nor have other conflicts of interest or bias on the subject. They will act impartially and respect the [code of conduct of the profession](#).

32. Given the evaluation learning objective, the evaluation manager and team will promote stakeholders' participation throughout the evaluation process. Yet, to safeguard the independence of the evaluation, WFP staff will not be part of the evaluation team or participate in meetings with external stakeholders if the evaluation team deems that their presence could bias the responses.

### 6.2 Evaluation Management

33. The evaluation will be managed by the company's EM for OpEvs (as per LTA). The EM will be responsible to manage within the given budget the evaluation process in line with EQAS and the expectations spelt out in these TOR and to deliver timely evaluation products meeting the OEV standards. In particular, the EM will:

- Mobilise and hire the evaluation team and provide administrative backstopping (contracts, visas, travel arrangements, consultants' payments, invoices to WFP, etc).
- Act as the main interlocutor between WFP stakeholders and the ET throughout the evaluation and generally facilitate communication and promote stakeholders' participation throughout the evaluation process.
- Support the evaluation team by orienting members on WFP, EQAS and the evaluation requirements; providing them with relevant documentation and generally advising on all aspects of the evaluation to ensure that the evaluation team is able to conduct its work.
- Ensure that the evaluation proceeds in line with EQAS, the norms and standards and code of conduct of the profession and that quality standards and deadlines are met.
- Ensure that a rigorous and objective quality check of all evaluation products is conducted ahead of submission to WFP. This quality check will be documented and an assessment of the extent to which quality standards are met will be provided to WFP.
- Provide feedback on the evaluation process as part of an evaluation feedback e-survey.

### 6.3 Evaluation Conduct

34. The ET will conduct the evaluation under the direction of the EM. The team will be hired by the company following agreement with OEV on its composition.

35. **Team composition.** The evaluation team is expected to include 3 to 4 members, including the team leader and 2 to 3 international/national evaluators. It should include women and men of mixed cultural backgrounds and at least one national of the Somalia or a person who understands the culture and local context. Past WFP experience would be an asset.

36. The estimated number of days is expected to be in the range of 40-60 for the team leader; 35-50 for international evaluators and 20-30 for national evaluator(s)

37. **Team competencies.** The team will be multi-disciplinary and include members who together provide an appropriate balance of expertise and practical knowledge in the following areas (listed in order of priority):

- Food security, livelihoods and resilience
- Nutrition (preventive and curative)
- School feeding
- Evaluating in fragile contexts and insecure environments, including risk assessment and programme monitoring in these contexts<sup>172</sup>
  - Gender expertise/good knowledge of gender issues

38. All team members should have strong analytical and communication skills; evaluation experience and familiarity with the country or region.

39. All team members need to be fluent in English, oral and written. Previous experience and knowledge of Somalia within the team will be a valuable asset. Having a member who can speak the relevant local language would be an added asset to the team, although this is not a requirement as there is the option of using interpreters.

40. **The Team leader** will have technical expertise in one of the technical areas listed above as well as expertise in designing methodology and data collection tools and demonstrated experience in leading similar evaluations. She/he will also have leadership and communication skills, including a track record of excellent English writing and presentation skills.

41. Her/his primary responsibilities will be: i) defining the evaluation approach and methodology; ii) guiding and managing the team; iii) leading the evaluation mission and representing the evaluation team; iv) drafting and revising, as required, the inception package, aide memoire and evaluation report in line with EQAS; and v) provide feedback to OEV on the evaluation process as part of an evaluation feedback e-survey.

42. **The team members** will bring together a complementary combination of the technical expertise required and have a track record of written work on similar assignments.

43. Team members will: i) contribute to the methodology in their area of expertise based on a document review; ii) conduct field work; iii) participate in team meetings and meetings with stakeholders; iv) contribute to the drafting and revision of the evaluation products in their technical area(s); and v) provide feedback on the evaluation process as part of an evaluation feedback e-survey.

## 6.4 Security Considerations

44. As an 'independent supplier' of evaluation services to WFP, the evaluation company is responsible for ensuring the security of all persons contracted, including adequate arrangements for evacuation for medical or situational reasons. The consultants contracted by the evaluation company do not fall under the UN Department of Safety & Security (UNDSS) system for UN personnel.

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<sup>172</sup> The country office uses third party monitoring arrangements and the evaluation team will need competencies to assess how this arrangement has worked

45. However, to avoid any security incidents, the Evaluation Manager is requested to ensure that:

- Travelling team members complete the UN system's applicable Security in the Field courses in advance, print out their certificates and take them with them. (These take a couple of hours to complete.)
- The WFP CO registers the team members with the Security Officer on arrival in country and arranges a security briefing for them to gain an understanding of the security situation on the ground
- The team members observe applicable UN security rules and regulations – e.g. curfews etc.

(For more information, including the link to UNDSS website, refer to EQAS on page 30)

## 7. Roles and Responsibilities of WFP Stakeholders

46. **The Country Office.** The CO management will be responsible to:

- Assign a focal point for the evaluation. Liljana Jovceva, *Programme Officer*, will be the CO focal point for this evaluation.
- Comment on the TORs and the evaluation report
- Provide the evaluation manager and team with documentation and information necessary to the evaluation; facilitate the team's contacts with local stakeholders; set up meetings, field visits; provide logistic support during the fieldwork; and arrange for interpretation, if required.
- Organise security briefings for the evaluation team and provide any materials as required
- Participate in discussions with the evaluation team on the evaluation design and on the operation, its performance and results and in various teleconferences with the evaluation manager and team on the evaluation products.
- Organise and participate in two separate debriefings, one internal and one with external stakeholders.
- Prepare a management response to the evaluation recommendations
- Provide feedback to OEV on the evaluation process as part of an evaluation feedback e-survey

47. **The Regional Bureau.** The RB management will be responsible to:

- Assign a focal point for the evaluation. Genevieve Chicoine, Regional M&E advisor will be the RB focal point for this evaluation.
- Participate in discussions with the evaluation team on the evaluation design and on the operation, its performance and results. In particular, the RB should participate in the evaluation debriefing and in various teleconferences with the evaluation manager and team, as required.
- Provide comments on the TORs and the evaluation report.
- Coordinate the management response to the evaluation and track the implementation of the recommendations.
- Provide feedback to OEV on the evaluation process as part of an evaluation feedback e-survey.

48. **Headquarters.** Some HQ divisions might, as relevant, be asked to discuss WFP strategies, policies or systems in their area of responsibility and to comment on the evaluation TOR and report.

49. **The Office of Evaluation.** OEV is responsible for commissioning the evaluation and Grace Igweta, Evaluation officer, is the OEV focal point. OEV's responsibilities include to:

- Set up the evaluation including drafting the TOR in consultation with concerned stakeholders; select and contract the external evaluation company; and facilitate the initial communications between the WFP stakeholders and the external evaluation company.



- Enable the company to deliver a quality process and report by providing them with the EQAS documents including process guidance, content guides and templates as well as orient the evaluation manager on WFP policies, strategies, processes and systems as required.
- Comment on the evaluation report and submit the final evaluation report to an external post-hoc quality review process to independently report on the quality, credibility and utility of the evaluation and provide feedback to the evaluation company accordingly.
- Publish the final evaluation report on the WFP public website and incorporate findings into an annual synthesis report, which will be presented to WFP's Executive Board for consideration.
- Conduct an evaluation feedback e-survey to gather perceptions about the evaluation process and the quality of the report to be used to revise the approach, as required.

## **8. Communication and budget**

### **8.1 Communication**

50. Issues related to language of the evaluation are noted in sections 6.3 and 5, which also specifies which evaluation products will be made public and how and provides the schedule of debriefing with key stakeholders. Paragraph 28 describes how findings will be disseminated.

51. To enhance the learning from this evaluation, the evaluation manager and team will also emphasize transparent and open communication with WFP stakeholders. Regular teleconferences and one-on-one telephone conversations between the evaluation manager, team and country office focal point will assist in discussing any arising issues and ensuring a participatory process.

### **8.2 Budget**

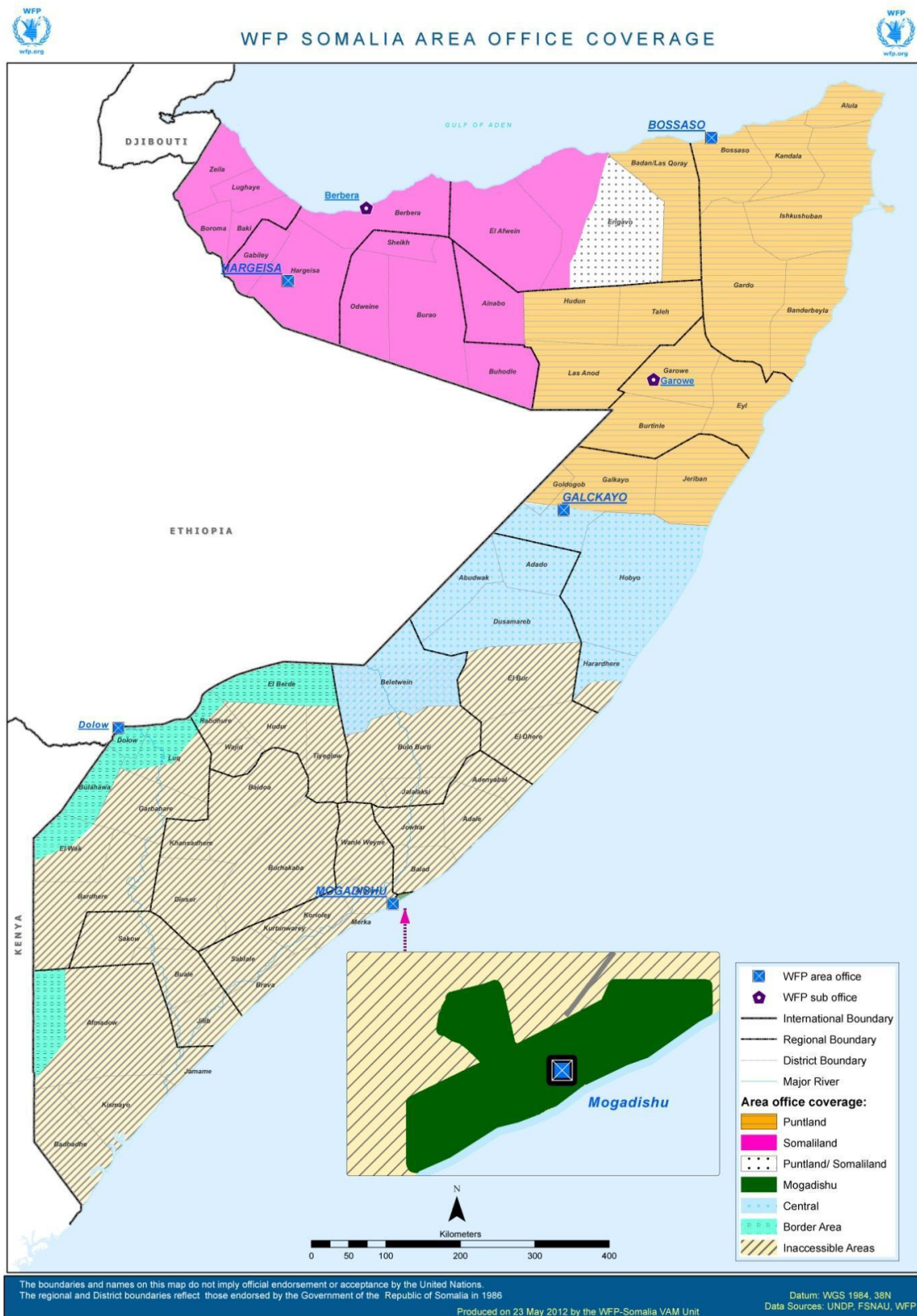
52. **Funding source:** The evaluation will be funded in line with the WFP special funding mechanism for Operations Evaluations (Executive Director memo dated October 2012). The cost to be borne by the CO will be established by the WFP Budget & Programming Division (RMB).

53. **Budget:** The budget will be prepared by the company (using the rates established in the LTA and the corresponding template) and approved by OEV. For the purpose of this evaluation the company will:

- Use the management fee corresponding to a large operation.
- Take into account the planned number of days per function noted in section 6.3.
- Budget for domestic travel only where this will involve use the United nations humanitarian air services

Please send queries to Grace Igweta, Evaluation officer; Email: [Grace.Igweta@wfp.org](mailto:Grace.Igweta@wfp.org) Landline+39 06 65 13 2847|Moblie:+39 349-900-6861|Sykpe:graceigw

# Annex 1: Map



## Annex 2: Evaluation Timeline

Activity/Deliverables	Entity Responsible				2014												2015																								
	Eval Manager	Eval Team	OEV	CO	RB	June			July			Aug			Sept			Oct			Nov			Dec			Jan			Feb			Mar								
						02-Jun	09-Jun	16-Jun	23-Jun	30-Jun	07-Jul	14-Jul	21-Jul	28-Jul	04-Aug	11-Aug	18-Aug	25-Aug	01-Sep	08-Sep	15-Sep	22-Sep	29-Sep	06-Oct	13-Oct	20-Oct	27-Oct	03-Nov	10-Nov	17-Nov	24-Nov	08-Dec	15-Dec	22-Dec	29-Dec	05-Jan	12-Jan	19-Jan	26-Jan	02-Feb	09-Feb
1 Desk review, consultation and preparation of TOR			X																																						
2 Stakeholders comments on TORs				X	X																																				
3 <b>Final TOR</b>			X																																						
4 Evaluation company selection and contracting			X																																						
5 Operational documents consolidation and sharing				X																																					
6 Hand-over of eval management to EM	x		X	x	x																																				
7 Evaluation team briefing - expectations, requirements, quality standards	X	x																																							
8 Desk review, Consultation with the CO/RB , drafting of the Inception Package			X																																						
9 Quality Assurance of the Inception Package	X																																								
9 Comments on Inception Package				X	X																																				
10 <b>Final Inception Package</b>																																									
11 Eval mission preparation (setting up meetings,field visits, etc)				X																																					
12 Introductory briefing		X																																							
13 Field work		X																																							
14 Exit debriefing		X																																							
15 <b>Aide memoire</b>		X																																							
16 Evaluation Report drafting		X																																							
17 Quality Assurance of the draft Evaluation Report	X																																								
18 <b>Draft Evaluation Report</b>	X																																								
19 Stakeholders comments on Evaluation Report		X	X	X																																					
20 Revision of the report + Evaluation matrix	X	X																																							
21 <b>Final Evaluation Report</b>	X																																								
23 Preparation of the Management Response			X	X																																					
24 <b>Management Response</b>			X	X																																					
22 Post-hoc Quality Review and end of evaluation survey		X																																							
25 Report Publication + integration in lessons learning		X																																							

## Acronyms

ALNAP	Active Learning Network for Accountability and Performance in Humanitarian Action
BR	Budget Revision
CO	Country Office (WFP)
DAC	Development Assistance Committee
EB	(WFP's) Executive Board
EQAS	Evaluation Quality Assurance System
EM	Evaluation manager
ER	Evaluation Report
ET	Evaluation Team
HQ	Headquarters (WFP)
IP	Inception Package
LTA	Long-Term Agreement
MDG	Millennium Development Goals
M&E	Monitoring and Evaluation
Mt	Metric Ton
NGO	Non-Governmental Organisation
OEV	Office of Evaluation (WFP)
OpEv	Operation Evaluation
RB	Regional Bureau (WFP)
TOR	Terms of Reference
UN	United Nations
UNCT	United Nations Country Team
UNEG	United Nations Evaluation Group
WFP	World Food Programme

## Annex 2: Evaluation Matrix

Key Question 1: How appropriate is the operation?							
Nber	Sub-questions	Measure/Indicator	Main Sources of Information	Data Collection Methods	Data Analysis Methods	Evidence quality	Importance for Review Criteria
1.1	<p>How appropriate was the operation at project design stage to the needs of the food insecure population including the distinct needs of women, men, boys and girls from different groups, as applicable, and remained so over time?:</p> <p>1.1.1. Activities based on needs assessment?</p> <p>1.1.2. Justification and appropriateness of activities / role of needs assessments?</p> <p>1.1.3. Role of other lessons learned and recommendations (WFP evaluations and other) in design?</p> <p>1.1.4. Were alternatives considered?</p> <p>1.1.5. Justification and appropriateness transfer modalities / role of needs assessments?</p> <p>1.1.6. Appropriateness of targeting criteria / role of needs assessments?</p> <p>1.1.7. Are activities differentiated to specific contexts? How and why?</p> <p>1.1.8. Role of partners and beneficiaries in design?</p>	<p>Basic indicators: health, nutrition, food security, education, household economy for intervention areas / beneficiaries compared to non-covered areas / populations</p> <p>If possible comparisons will be done at six months intervals</p> <p>Documented preferred option</p> <p>Documented justification of transfer modalities</p> <p>Infrastructure available</p> <p>Typical distance to markets</p>	<p>Context information, e.g. from FSNAU</p> <p>Needs assessment reports, Program documents (Program formulation documents as well as M&amp;E documents)</p> <p>Program Meetings minutes</p> <p>Partner records</p> <p>Implementing partners</p> <p>Beneficiaries and community leaders in intervention areas</p>	<p>Desk review of project formulation and strategy documents</p> <p>Key Informant interviews with respective partners liaisons</p> <p>Face to face interview with beneficiaries of each intervention</p> <p>Focus groups with beneficiaries and community leaders in intervention areas</p> <p>Desk review of project M&amp;E documents</p>	<p>Targeting analysis</p> <p>Enumeration of intervention to the various beneficiary categories</p> <p>Enumeration of beneficiary involvement</p> <p>Analysis of the transfer modalities</p> <p>Analysis of stakeholder involvement at formulation</p> <p>Accessibility analysis</p> <p>Analysis of Intervention infrastructure</p>	Medium to high	<p>Relevance</p> <p>Effectiveness</p> <p>Connectedness</p> <p>Coverage</p> <p>Sustainability</p>

	1.1.9. Was required infrastructure (e.g. cash handlers) available at program start-up? 1.1.10. Gender considerations in design?	Supply of local markets  Price trends at local markets  Documented / evidence of exclusions					
1.2	Has there been coherence with Government policies, including sector policies and strategies, interventions of other key players (relevant humanitarian and development partners) at time of design and during intervention? <b>1.2.</b> 1.2.1. Level and measures of coordination with other initiatives in design and implementation? 1.2.2. Participation of Government and other partners in implementation?	Documented description of other relevant initiatives	Documented strategies and policies  Clusters Partner Liaisons  Government representatives including (line ministries and agencies representatives)	Desk Review of project documents including strategy and policy documents  Clusters Partner interviews  Partner program documents  KII with government representatives Desk review of	Stakeholder analysis  Communication analysis  Contribution analysis	Medium	Relevance Effectiveness Connectedness Coverage Coherence Sustainability
1.3	Was there coherence with WFP strategies, policies and normative guidance?	Documented description of relevant WFP strategies, policies, and normative guidance	WFP Strategies, policies, and guidance notes  PRRO documents  Project staff	WFP Strategies, policies, and guidance notes  Interviews with WFP staff			
1.4	Was there coherence with partners? Have there been opportunities for streamlining/simplifying/re-	Documented and evidence of	Documented strategies and policies	Desk review of Strategy and policy documents	Analysis of nature of coordination	Medium	Relevance Effectiveness Sustainability

	organizing activities to achieve better coherence and complementarity with other stakeholders, including donors, UN agencies and civil society? <b>1.3.</b> <b>1.4.</b> 1.4.1. Have there been joint needs assessments?	uncoordinated and coordinated activities  Documented and evidence of comparative analysis of WFP's interventions in Somalia	Clusters Partner Liaisons	Key informant interviews with Cluster Partners Liaisons  KII with government line ministries and agencies representative	Comparative analysis of WFP intervention  Analysis of government and other stakeholders understanding of the PRRO  Mapping of stakeholder inputs		
<b>Key Question 2: What are the results of the operation?</b>							
<b>Nber</b>	<b>Sub-questions</b>	<b>Measure/Indicator</b>	<b>Main Sources of Information</b>	<b>Data Collection Methods</b>	<b>Data Analysis Methods</b>	<b>Evidence quality</b>	<b>Importance for Review Criteria</b>
2.1	To what extent were the planned outputs for each activity attained? (including the number of beneficiaries served disaggregated by women, girls, men and boys)	Indicators from the PRRO's result framework for different beneficiary groups	PRRO baseline and Monitoring reports  Beneficiaries and community leaders  Implementing partners	Review of PRRO Monitoring reports  Focus groups, group interviews, and individual interviews with beneficiaries and community leaders  Interviews with implementing partners	Comparison of actual versus planned activity  Analysis of beneficiary sentiments	Medium to high	Efficiency Effectiveness Impact
2.2	To what extent did the activities lead to the realization of the operation objectives as well as to unintended effects? (highlighting, as applicable, differences for different groups,	Indicators from the PRRO's result framework	PRRO Monitoring documents  Beneficiaries and Community Leaders	Review of PRRO Monitoring reports	Analysis of the program reach	Low to medium	Efficiency Effectiveness Impact

	<p>including women, girls, men and boys):</p> <p>2.</p> <p><b>2.1.</b></p> <p><b>2.2.</b></p> <p>2.2.1. Are there some types of activities that have been more successful and which ones?</p> <p>2.2.2. What have triggered unintended effects (positive and negative)?</p> <p>2.2.3. Are observed results sustainable?</p> <p>2.2.4. Are there observable behavior changes</p>	<p>Documented / evidence of unintended effects for different beneficiary groups</p> <p>Documented / evidence of unintended effects for non-targeted beneficiaries</p>	<p>Implementing partners</p>	<p>Focus groups discussions with beneficiaries</p> <p>KII interviews with beneficiaries and community leaders</p> <p>Interviews with implementing partners</p>	<p>Analysis of beneficiary dietary practices</p> <p>Analysis of the education milestones accomplishments</p> <p>Analysis of knowledge change and practices</p> <p>Analysis of change in coping mechanisms</p> <p>Analysis of change in household assets</p> <p>Analysis of unintended effects</p>		
2.3	<p>What have been the contribution of to operation to WFP strategy and programs</p> <p><b>2.3.</b></p> <p>2.3.1. What is the understanding and knowledge of the operation among staff of other WFP initiatives?</p>	<p>Documented / evidence of complementarity / overlaps</p> <p>Documented / evidence of coordination of WFP's initiatives in Somalia</p>	<p>Country executive briefs</p> <p>WFP staff in Somalia representing all initiatives of WFP's country portfolio</p>	<p>Review of Country executive briefs</p> <p>Interviews with WFP staff in Somalia representing all initiatives of WFP's country portfolio</p>	<p>Contribution analysis</p>	<p>Medium</p>	<p>Efficiency</p> <p>Connectedness</p> <p>Sustainability</p>



				Interview with cluster leader liaisons			
2.4	How efficient has been the operation? <b>2.4.</b> 2.4.1. Is the operation cost effective? 2.4.2. Does WFP have comparative advantage for the different types of activities?	Cost-effectiveness  Comparative advantages in different sectors	PRRO Monitoring reports  Audit reports  Partner Documents  Government (line ministries and agencies)	Review of PRRO Monitoring reports  Interviews with other actors in Somalia  Interviews with Governments	Cost reviews  Financial analysis  Analysis of comparative advantages  Analysis of activities and cost rationalization options	Low to medium	Efficiency Coverage Impact Sustainability
<b>Key Question 3: Why and how has the operation produced the observed results?</b>							
<b>Nber</b>	<b>Sub-questions</b>	<b>Measure/Indicator</b>	<b>Main Sources of Information</b>	<b>Data Collection Methods</b>	<b>Data Analysis Methods</b>	<b>Evidence quality</b>	<b>Importance for Review Criteria</b>
3.1	What processes, systems and tools are in place to support the operation design, implementation, monitoring/evaluation and reporting? 3. <b>3.1.</b> 3.1.1. What are the key internal constraints in running the operation and how has it been addressed?	Systems Tools Other resources in place	PRRO documents, incl. planning and monitoring reports  WFP Staff  Implementing partners  Beneficiaries and community leaders	Review of PRRO documents, incl. monitoring reports  Staff interviews  Interviews with implementing partners  Focus groups discussions with beneficiaries and community leaders	Analysis of the existing audit systems and responses to management notes  Capacity analysis	Medium	Efficiency Effectiveness Connectedness Sustainability

3.2	<p>To what extent has the external operating environment (funding climate; external incentives and pressures; etc.) influenced the results of the intervention?</p> <p><b>3.2.</b> 3.2.1. Are alternative strategies and contingency plans in place and updated?</p>	<p>Funding Security</p>	<p>Funding partners WFP management</p>	<p>Interviews with Funding partners  KII with implementing partner Desk review of WFP reports</p>	<p>Analysis of the operating environment? Analysis of source and uses of funds Analysis of weather patterns influence on service delivery</p>	<p>Low to medium</p>	<p>Connectedness Coherence Sustainability</p>
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### Annex 3: Stakeholder Analysis

Organization	Key Area of Interest in the Evaluation (P: Primary Stakeholder, O: Other Stakeholders)	Key Area of Interest for the PRRO Evaluation	Participation in the Evaluation	Who
<b>WFP Units</b>				
Executive Board	P Accountability Learning	General input	Not foreseen	
CO and RB Management	P Accountability Learning	Strategic planning PRRO contribution to WFP Strategies	Interviews, Support in the process Provision of background data	Senior management, incl. HoP
CO in general	P Accountability Learning	Strategic planning Management and coordination issues Technical / sector aspects	Interviews	Leads of sectors
Area Offices	P Accountability Learning	Management and coordination issues Technical / sector aspects	Interviews	Head of offices Leads of relevant sectors
Evaluation Office	P Learning Accountability	Conceptual issues re. operational and outsourced evaluations Findings of this evaluation will be included in the annual synthesis and presented to the EB	Participation in some meetings during the field visit	Evaluation Officer/ OEV focal point for this evaluation
<b>External to WFP / Partners</b>				
UN partners suggested for joint activities (Nairobi, Mogadishu, and local): <ul style="list-style-type: none"> <li>• UNICEF</li> <li>• FAO</li> <li>• UNHCR</li> </ul>	P Learning Accountability	Feedback on implementation Identification of relevant initiatives (during operation and future) Issues of coordination and cooperation	Interviews Provision of relevant background documents	Heads of programs related to Somalia interventions M&E staff Cluster leads
Other UN Partners active in humanitarian and development issues in Somalia (Nairobi, Mogadishu, and local): <ul style="list-style-type: none"> <li>• UNDP</li> <li>• WHO</li> <li>• OCHA</li> </ul>	O Learning / general information	Identification of relevant initiatives Feedback on implementation General context (during operation and future) Issues of coordination and cooperation	Interviews Provision of relevant background documents	Heads of programs related to Somalia interventions M&E staff Cluster leads

Organization	Key Area of Interest in the Evaluation (P: Primary Stakeholder, O: Other Stakeholders)	Key Area of Interest for the PRRO Evaluation	Participation in the Evaluation	Who
UN initiatives (Nairobi, Mogadishu, and local): <ul style="list-style-type: none"> <li>FSNAU</li> <li>Clusters (Food Security, Education, Health, Logistics, Nutrition, Protection, Shelter, WASH)</li> </ul>	O Learning / general information	Feedback on role of operation in overall humanitarian response  Identification of relevant initiatives General context  Issues of coordination and cooperation	Interviews Provision of relevant background documents	Heads of relevant initiatives
Key donors (Nairobi): <ul style="list-style-type: none"> <li>USA</li> <li>Canada</li> <li>Germany</li> <li>EU</li> <li>Japan</li> <li>Switzerland</li> <li>United Kingdom</li> </ul>	P Learning Accountability / general information	Identification of relevant initiatives  General context during operation  Future contexts and opportunities	Interviews Provision of relevant background documents	Heads of programs
<b>Government Ministries and Local Institutions</b>				
Ministry of Interior, Mogadishu	P Learning Accountability / general information	Feedback on role of operation in overall humanitarian and development aspects  Identification of relevant other initiatives  General context (during operation and future)  Issues of coordination and cooperation	Interviews Provision of relevant background documents	Sector directors / heads
Ministry of Health, Mogadishu				
Ministry of Health Puntland (MOH)				
Ministry of Agriculture & Irrigation Puntland (MOAI),				
Ministry of Education, Puntland				
Ministry of Interior, Puntland				
Ministry of Education, Somaliland				
Puntland Local Authority				
Ministry of Health, Somaliland				
Ministry of Agriculture Somaliland, Ministry of Livestock Somaliland				

Organization	Key Area of Interest in the Evaluation (P: Primary Stakeholder, O: Other Stakeholders)	Key Area of Interest for the PRRO Evaluation	Participation in the Evaluation	Who
Food Assistance Coordination Agency (FACA), Somaliland				
Humanitarian Aid Disaster Management Agency (HADMA),				
National Environment Research and Drought (NERAD)				
<b>Implementing Partners</b>				
International NGOs, Strengthening Nutrition Security (SNS) Consortium	P Learning Accountability	Feedback on role of operation for local and national FS and resilience	Interviews (group and individual) Provision of background documents	Heads of operations / programs / M&E staff
National NGOs		Feedback on nutrition		
Local NGOs		Feedback on transfer modalities, targeting, need assessment, and follow-up		
Government Institutions		Feedback on the usefulness of training		
		Insight into effectiveness of WFP systems and processes		
		Identification of relevant other initiatives		
<b>Local leaders</b>				

Organization	Key Area of Interest in the Evaluation (P: Primary Stakeholder, O: Other Stakeholders)	Key Area of Interest for the PRRO Evaluation	Participation in the Evaluation	Who
Community leaders, committees and	P Learning Accountability	Insight into the appropriateness and impact of the response  Targeting and choice of transfer modalities  General support and follow-up  Link to communities and male/female beneficiaries  Information about working with WFP, issues of access and appropriateness	Interviews (group and individual) Focus groups	Community leaders/ workers/ committees and School teachers
<b>Beneficiaries</b>				
Beneficiaries	P Learning Accountability	Insight into the appropriateness and impact of the response  Targeting and choice of transfer modalities  General support and follow-up  Information about working with WFP, issues of access and appropriateness	Interviews (group and individual) Focus groups	Representatives of beneficiaries (such as mothers) school children, participants in F/VFT and F/VFA activities, beneficiaries of vouchers, beneficiaries of food distribution,  Local governance targeted for cap. Dev.

## **Annex 4: Evaluation Methodology**

### ***Evaluation***

32. The evaluation is guided by the Terms of Reference (TOR) of August 20, 2014 and follows WFP's evaluation policy, including the standards and guides outlined in the document 'Evaluation Quality Assurance Systems – Guidelines for Operations Evaluations' from June 2014. This also means that the evaluation addresses relevance, efficiency, effectiveness, impact, and sustainability when responding to the evaluation questions about the operation's appropriateness, results, and how the results were generated. Considering the nature of PRRO 200443 addressing a complex and complicated context with security challenges, many actors, and different processes to move towards more long term development, the evaluation will include OECD-DAC's special criteria for complex emergencies and include attention to connectedness<sup>173</sup>, coherence<sup>174</sup>, and coverage<sup>175</sup> in line with ALNAP's guidelines for evaluating humanitarian action using OECD-DAC criteria and responding to the principles of Good Humanitarian Donorship.
33. Overall, the TOR defines the objectives of the evaluation in terms of:
- **Accountability:** The evaluation will assess and report on the performance and results of the operation. A management response to the evaluation recommendations will be prepared.
  - **Learning:** The evaluation will determine the reasons why certain results occurred or not to draw lessons, derive good practices and pointers for learning. It will provide evidence-based findings to inform operational and strategic decision-making. Findings will be actively disseminated and lessons will be incorporated into relevant lesson sharing systems.
34. Moreover, the evaluation of the PRRO follows a holistic approach with due attention to the different local contexts, including gender sensitiveness. It is particularly important to recognize that the areas where the PRRO 200443 is implemented are extremely heterogeneous with regard to socio-economic conditions, political aspects, and opportunities and challenges of the physical environment. Furthermore, these factors are highly volatile in the complex and complicated areas of operation. The evaluation therefore was flexible with regard to selection of sites for field visits, programming of interviews, etc. Security, for instance, can change almost instantly the accessibility of specific areas of operation. As a result, the final site selection for the evaluation was made closer to the time of the field visit.
35. The evaluation scope covers the period from the formulation of the operation (June to December 2012) and the period from the beginning of the operation in January 2013 until the start of the field mission of the evaluation in January 2015. While covering the formulation period is important in understanding the design context and thus the relevance of the Operation, the focus is on the implementation period.

### ***Data Sources***

36. The evaluation applies a mixed set of data analysis tools, including context analysis, gender analysis, stakeholder analysis, contribution analysis, financial analysis, and analysis of levels of participation for the final assessment. In order to inform the different analysis tools the evaluation team collected and analyzed data from a range of sources to allow triangulation

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<sup>173</sup> "Connectedness refers to the need to ensure that activities of a short-term emergency nature are carried out in a context that takes longer-term and interconnected problems into account." ALNAP

<sup>174</sup> "The need to assess security, developmental, trade and military policies as well as humanitarian policies, to ensure that there is consistency and, in particular, that all policies take into account humanitarian and human-rights considerations" ALNAP

<sup>175</sup> "The need to reach major population groups facing life-threatening suffering wherever they are." ALNAP



and deepen understanding. The data for the evaluation was collected from:

- General background documentation, special documentation on the operation performance, documentation developed in the context of the evaluation such as trend analysis and special studies. The special document on the operation performance includes individual and consolidated project proposals and progress reports, donor agreements and reports, assessment reports and baseline survey data, previous evaluation reports, monitoring and evaluation reports and associated gender disaggregated data, strategic plans (national, WFP specific, UN and cluster), and policy guidance and treatment protocols
- Stakeholders. The evaluation analysis ensures that the perspectives of key stakeholders are incorporated.

37. Field operations were visited for more in-depth analysis. The selection criteria for selected field operations include:

- Accessibility
- Regional representation / operations in each Area Office
- Urban / Rural locations
- A range of implementing partners: Government, International NGOs and local NGOs
- Government / non-government controlled areas and disputed areas (northern Somalia)
- Transfer modality: Cash / Voucher / In kind
- Activities finished by January 2015 / Activities planned to be finished later
- Type of Activity:

Nutrition	BSFP
	Targeted SFP
	MCHN
	TB or HIV clients
Relief	GFD
	Wet feeding (cooking for IDPs at site)
Recovery	Food / cash for assets
	Food / cash for training
	Food / cash for work
Education	School feeding/meals
Food security systems	Support to early warning systems
	Food security monitoring
Capacity development	Training, provision of other non food items and support

38. Based on a preliminary analysis carried out for the preparation of the Inception Package, the evaluation team suggested sites to fulfil the following criteria:

- At least 1 site per activity (preference given to sites with multiple activities)
- At least 1 site for local NGO as partner
- At least 1 site for NGO with coverage in more than one area
- At least 1 site with government as a partner
- At least 1 site for sites with area office
- At least 1 site under government control
- At least 1 site not under government control

The table below shows the final list of sites visited for more detailed assessment during the evaluation. This selection followed the presented selection criteria and further agreement with the CO taking into account security and logistical concerns.

**Table 1: List of sites visited (by Area office and activity)**

<b>Dolow AO</b> WFP hilltop compound/WFP warehouse	<b>Bosasso AO</b> Livelihood – Bosasso
TSPF – Kabasa IDP Camp	Livelihood – Congor
FFT – Kansale IDP Camp	Livelihood – Lower Baalade
FFA – Kabasa – Canals	TSPF - Biyakulule IDPs camp
FFA – Dolow – Airstrip	MCHN - Bariga Bossaso IDPs camp
School Feeding – Dolow and Kansale primary	VFT – NRC
FFA – Distribution, Dolow market area	VFT – GDA centre
FFA – Luq Returnees Way Station	WFP Warehouse – Beach Warehouse
TSFO - Luq Returnees Way Station	
<b>Hargeisa AO</b> MCH – Hargeisa	<b>Galkayo AO</b>
SFO – en route to Dila	MCHN
MCHN – Dila	TSPF
Resilience – Hara Sheikh	School Feeding
<b>Garowe SO</b> FFA – Lichere	WFP Warehouse
MCHN – Gargaar	FFT – GVTC Centre
TSPF – Banadir IDP camp	FFT – WRDF Centre
Resilience – Garowe Vocational Training Centre	
Traders - Garowe	

39. The previous table presents the final list of sites visited for more detailed assessment during the evaluation. This selection followed the presented selection criteria and further agreement with the CO taking into account security and logistical concerns.

### **Data collection methods and tools**

To ensure consistency during the data collection, the Evaluation Matrix was applied in line with WFP’s evaluation policy. The Matrix outlines the key evaluation questions identified in the TOR, complemented by additional questions suggested by the Evaluation Team, key indicators for each question identified by the Evaluation Team, main sources of information, data collection and analysis tools, and the Evaluation Team’s estimation of the quality of the data to be collected.

The evaluation will use various mixed methods and tools for data collection:

- Desk study: A review of existing literature, documents and data was conducted focusing on substantive programmatic, management, and operational aspects of PRRO 200443. The review of existing literature particularly informed the context and gender analysis and was used for assessment of relevance, cooperation, and efficiency and effectiveness. The review

of documents and data from the PRRO 200443 allows for greater insight into the efficiency and effectiveness of the operation and inform, inter alia, the financial analysis. The data and information gathered through the desk study was validated through stakeholder interviews.

- Interviews: Interviews were conducted with selected stakeholders primarily as face-to-face combined with virtual when logistical constraints did not allow face-to-face interviews. The information was validated through cross-questions. Special attention was given to language and a native speaker from the evaluation team was participating in the field interviews. Focus groups and group interviews: Focus groups and group interviews were organized with selected groups of stakeholders, primarily beneficiaries and local leaders on specific issues for collective reflection. This provided further insight into the understanding of the local rationale and the relevance of the operations. Special attention was paid to ensuring gender sensitive selection of focus groups, group interviews, and participatory workshops. A native speaker from the evaluation team would always participate in these activities.
- General observation: The evaluation team has critical experience with similar relevant activities and used that knowledge and insight to obtain a general appreciation of the activities.
- Debriefings: The evaluation included initial briefing at the beginning of the operation and a final debriefing. These events provided additional and complementary information to the team for the analysis.

Gender sensitivity in line with the UNEG Handbook on Integrating Gender Equality in Evaluation was applied when selecting data collection tools with due consideration to the local contexts and in consultation with the implementing agencies and other stakeholders with prime knowledge about local conditions.

## Annex 5: List of Key Informants

Name	Title	Organization
<b>Nairobi</b>		
<b>WFP</b>		
Laurent Burkera	Country Director	WFP Somalia Country Office
Moumini Ouedraogo	Deputy Country Director (Operations)	WFP Somalia Country Office
Liljana Jovceva	Head of Programme	WFP Somalia Country Office
Magnus Nielsson	Head of Partner Coordination	WFP Somalia Country Office
Hakan Falkell	Deputy Country Director (Support Services)	WFP Somalia Country Office
Pamela Wesonga	Nutrition Officer (Acting Head of Unit)	WFP Somalia Country Office
Peris Mwaura	Nutrition Officer	WFP Somalia Country Office
Wilfred Bengnwi	HIV and Nutrition Specialist (Consultant)	WFP Somalia Country Office
Phoebe Wachuka	Data Management	WFP Somalia Country Office
Barrack Okeyo	Monitoring and Evaluation Officer	WFP Somalia Country Office
Byron Poncesegura	Head of VAM section	WFP Somalia Country Office
Juergen Mueller	Head of Security	WFP Somalia Country Office
Nicoletta Capelli	Head of HR	WFP Somalia Country Office
Vladimir Jovcev	Head of Logistics	WFP Somalia Country Office
David Namulunyi	Head of Finance	WFP Somalia Country Office
Neema Awale	Programme Officer, Finance	WFP Somalia Country Office
Caroline Muchai	Head of Section (Livelihoods)	WFP Somalia Country Office
Erik Forsman	Head of UNHAS	WFP Somalia Country Office
Adam Bernstein	Programme Officer	WFP Somalia Country Office
Nigel Sanders	Air Transport Officer	WFP Somalia Country Office
Emmanuel Odongo	Head of Section (C&V)	WFP Somalia Country Office
Ravza Salieva	Head of Procurement	WFP Somalia Country Office
Suleha Noor	Head of Section (School Feeding)	WFP Somalia Country Office
Bernard Mrewa	Food Security Cluster	WFP Somalia Country Office

Michele Pict	Head of Pipeline	WFP Somalia Country Office
Hundubay	Head of relief	WFP Somalia Country Office
Waseem Khan	Compliance Officer	WFP Somalia Country Office
Salieva Ravza	Procurement Officer	WFP Somalia Country Office
Suleha Nuru	Program Assistant, School Feeding	WFP Somalia Country Office
Magnus Nielsson	Head of Partner Coordination	WFP Somalia Country Office
Vernon Archibald	Deputy Regional Director	WFP Regional Bureau for East and Central Africa
Genevive Chicoine	Regional M&E Advisor for OMN	WFP Regional Bureau for East and Central Africa
Allisson Oman	Nutrition Section	WFP Regional Bureau for East and Central Africa
Jo Jacobsen	Nutritionist	WFP Regional Bureau for East and Central Africa
Ilaria Dettori	Head of Program	WFP Regional Bureau for East and Central Africa
<b>Other United Nations Agencies</b>		
Ezatullah Majeed	Head of Nutrition	UNICEF Somalia
Erin McCloskey	Nutrition Specialist (Community)	UNICEF Somalia
Zivai Murira	Nutrition Specialist	UNICEF Somalia
Samson Desie	Nutrition Cluster Lead	UNICEF Somalia
Simon Karanga	Information Management Officer	UNICEF Somalia
Lauryne Mukrhu	Data Processing	UNICEF Somalia
Sayed Ezatullah Majeed	Chief of Nutrition	UNICEF Somalia
Foroogh Foyouzat	Deputy Country Representative	UNICEF Somalia
Dr. Hamayun Rizwan	Community Health Programmes	WHO Somalia
Rudi Van Aaken	Head of Program Head of Office	FAO Somalia
Nicolas Tremblay	Program Coordinator	FAO Somalia
Sofie Garde Thomle	Deputy Head of Office	OCHA Somalia
George Conway	Res Rep Somalia	UNDP
Martijn Goddeeris	Shelter Cluster Coordinator	UNCHR
Luca Alinovi	Director	FAO Kenya

Rudi VanAken	Deputy Head of Office	FAO
Nicolas Tremblay	Resilience Program Coordinator	FAO
Marco Procaccini	Program Officer, IDPs	UNHCR
Ingvill Morlandstoe	Education Cluster	UNON
Patrick Laurent	WASH Cluster Coordinator	UNICEF
Ahmed Mohamoud	Senior Livelihood Analyst	FSNAU
Abukar Yusuf	Nutrition Analyst	FSNAU
Rashid Mohamed	Nutrition Data Analyst	FSNAU
Abdoulaye Faray	Crop sector – lead	FSNAU
<b>Cooperating Partners</b>		
George Mugo	Program Officer	SIGHT
Agnes Shihemi	Social protection manager	Adeso
Degan Ali	Executive Director	Adeso
Nimo Ali	Head Programming	Himilo Foundation
Susan Wako	Health and Nutrition	Mercy USA
Shahida Suleiman	Health and Nutrition	APD
Cyprian Ouma	Nutrition Advisor East Africa	World Vision
Rachel Wolff	Development and Quality Assurance Director	World Vision Somalia Programme
Martin Busingye	Monitoring and Evaluation Coordinator	World Vision Somalia Program
Alison Donnerley	Regional Technical Advisor (Nutrition)	Save the Children International
Wilson Kipkoech	Programme officer humanitarian emergency affairs	World vision Somalia programme
Stephen Mutiso	Head of Food Security and Livelihoods	Save the Children
Andrew Lanyon	Somrep Coordinator	World Vision
Mohamed Moalim Abukar	CEO	HARDO INGO
<b>Donors</b>		
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Marc Bloch	Program Manager, Food Security	SDC, Swiss Embassy
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Abdikarim Ahmed Mohammed	Program Coordinator	PSA
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Abdirazak Isse	Director of Planning	Ministry of Health Puntland
Abdi Abu	Director of PHC	Ministry of Health Puntland
Mako Abdi Mohammed	Director of MCHN	Ministry of Health Puntland
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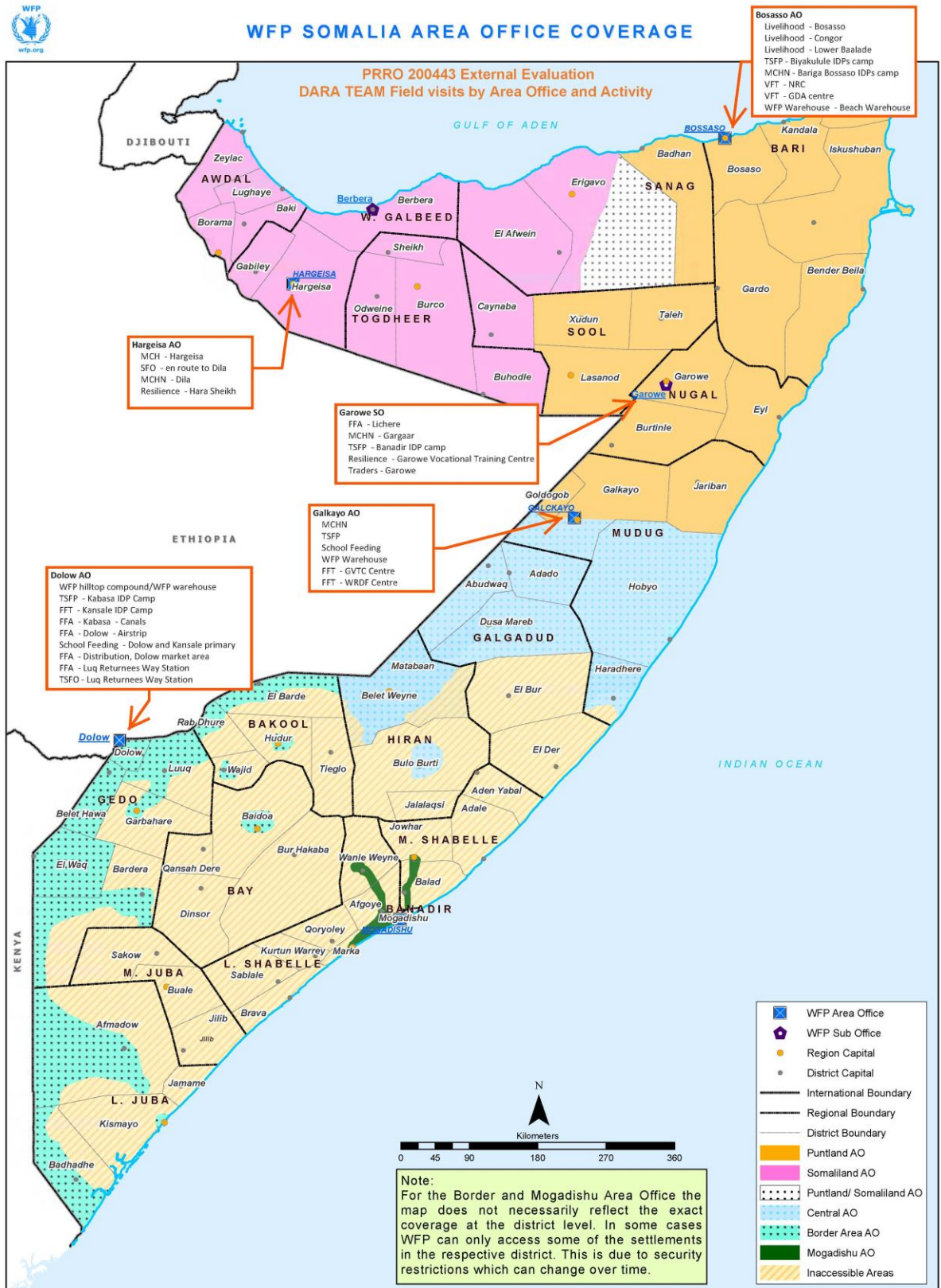
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<b>Galkayo AO</b>		
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Mohammed Nuredaim	Programme Manager	WFP Galkayo
<b>Galmadug State</b>		
Aweys Cali Siciid	Mudug Governor	Galmudug State
Omar Abdi Mohammed	Director General Health	Galmadug State
Zahra Mohammed Ali	Minister Family Affairs and Human Rights	Galmadug State
Mohammed Aden	Minister of Resources and Ports	Galmadug State
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<b>Dolow AO</b>		
<b>WFP</b>		
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Abdiaziz Ahmed	Adminstration officer	WFP Dolow
WFP staff	Logistics, Security, Admin, Program, Head of AO	WFP Dolow
<b>United Nations</b>		
Abdi Fatah Osman	Resilience program officer	FAO
Humayun Babar	Emergency manager	World Vision Dolow
Mohamed	UNDSS representative	UNDSS AO South Dolow
<b>Partners</b>		
Vincent Okello	Area manager	Coopi Dolow

Mohamed	Cash & Voucher	DRC Dolow
Abdi Botan	Project officer	NCA Dolow
Jared Onyango	Head in Somalia	CTG Global
Hussein	Project officer	Napad Ingo
Ayan CTG Global	M&E officer	Dolow
Ahmed Qathar	Project officer	CORD Ingo
<b>Local Government</b>		
Various local authorities	Police commander, deputy dc, social affairs chairman, representative from the assistant ministers office	

## Annex 6: Evaluability Challenges

KEY EVALUABILITY CHALLENGES IDENTIFIED DURING INCEPTION PHASE	EVALUABILITY CHALLENGES OBSERVED DURING THE EVALUATION AND CHALLENGES THAT HAVE BEEN MITIGATED
Insecurity and unstable contexts in much of the operation area	The challenge materialized during the Evaluation and limited the number of field visits, direct interactions with beneficiaries, and representativity of direct data collection. The Evaluation relied on direct observations from activities that were selected for their accessibility with regard to security and time required to travel to the activities. As a consequence the visited activities could not be considered representative but they provide illustrative examples. To mitigate the challenge the Evaluation paid special attention to triangulate data collection, including interviews with a large number of partners and careful review of background documents. Still, the limited direct interaction with representative beneficiaries and implementing partners is a critical shortcoming of the evaluation. Overall, the evaluation visited four of the five WFP Area offices as well as one of two Area Offices. A telephone conference with the Mogadishu addressed some general aspects of areas offices and the special conditions in Mogadishu. In terms of activities, the Evaluation visited all activity categories, except 'wet feeding' and 'general food distribution'.
Dearth of data	The challenge materialized during the Evaluation leading to difficulties in evidence based contextualizing the PRRO, for instance comparative needs analysis. The challenge is general and recognized by all partners working Somalia and has a significant impact on the relevance, effectiveness, efficiency, and impact assessment.
Lack of baselines	There was no specific baseline carried out during the design of the PRRO but it did not have serious implications for the Evaluation. Rather, the Evaluation found that several types of studies at several levels serve as baselines for the Evaluation: 1/Country wide contextual baselines: the Trend Analysis of Food and Nutrition Insecurity in Somalia prepared by WFP Somalia in October 2012 and with an update in November 2014 provides a contextual baseline. The focus of the trend analysis is food security and nutrition, livelihoods, markets, infrastructure, population, seasonality, and shocks and is based primarily on the seasonal food and nutrition security assessments from FSNAU combined with livelihood analysis from FEWS NET and land degradation analysis from SWALIM. The trend analysis, moreover, excludes data on people in famine from the severe drought year 2011. Furthermore, the FSNAU seasonal assessments provide contextual baselines on their own and have been used for the Evaluation. 2/Thematic baselines: during the PRRO implementation, various thematic baselines have been prepared, including Baseline Report for the Mogadishu Voucher for Training (Dec. 2013) and the Baidoa Beneficiary and Market Assessment (October 2014). The Evaluation has used the thematic baselines as contextual baselines for the assessment. 3/Baselines at the individual operation level: implementing partners are carrying out needs assessments and a general description of the baseline conditions in their Proposals for funding. Because of the large number of LFAs, which at the time of the Evaluation amounted to more than 200, the Evaluation did not go through all the Proposals in a systematic way but have used them at a more general level to assess the quality of the baseline information.
Lack of counterfactuals	The nature of the Evaluation does not allow the establishment of a counterfactual, particularly considering the dynamic and fluid situation in Somalia. The Evaluation has addressed the issue through more general reflections with resource persons on 'what would have happened if the operation had not been implemented'. Moreover, because of the lack funding for certain planned activities, the Evaluation as assessed the implications of the lack of these activities. As such the challenge is not considered as a major shortcoming of the quality of the Evaluation.
Heterogeneity of the Operation	The challenge was confirmed during he Evaluation. The large heterogeneity of the operation in all aspects and at all levels: geographically, capacity of implementing partners, needs and capacity of beneficiaries, focus areas of the PRRO, structure and capacity of counterparts (ministries and government institutions), etc., calls for context specific conclusions and recommendations. Still, the Evaluation has identified some overall aspects where general lessons learned, conclusions, and recommendations can be presented.
Staff turnover and lack of institutional memory	The challenge is highlighted in the Risk Matrix presented in the project document for the PRRO and has been confirmed during to a certain extent during the Evaluation. However, the Evaluation also found a large number of staff who have been working with the PRRO since its design. Moreover, the Evaluation interviewed external resource persons who had been involved in the PRRO since its early phase. Combined with a substantive document review (facilitated by a well documented PRRO) the challenge does not have implications for the quality of the Evaluation.
Indicators and monitoring data based on secondary data	The challenge did not materialize during the evaluation.

# Annex 7: Area office coverage and operations visited by the ET



The boundaries and names on this map do not imply official endorsement or acceptance by the United Nations.  
 The regional and district boundaries reflect those endorsed by the Government of the Republic of Somalia in 1996  
 Produced on 13 November 2014 by VAM WFP-Somalia  
 Datum: WGS 1984, 38N  
 Data Sources: UNDP, FSNAU, WFP

## Annex 8: Summary of Results Framework

	Logical Framework 2013 - 2014	Logical Framework 2014 - 2015
Cross-cutting outcomes		Gender equality and empowerment improved Food assistance interventions coordinated and partnerships developed and maintained WFP assistance delivered and utilized in safe, accountable and dignified conditions
<i>Strategic Objective 1</i>	<i>Save lives and protect livelihoods in emergencies</i>	<i>Save lives and protect livelihoods in emergencies</i>
Outcomes for SO 1	1.1: Stabilized acute malnutrition in children under 5 in targeted areas 1.2: Improved food consumption over assistance period for targeted households	1.1: Stabilized or improved food consumption over assistance period for targeted households and/or individuals 1.2: Stabilized or reduced under-nutrition among children aged 6-59 months and pregnant and lactating women
<i>Strategic Objective 2</i>	<i>Prevent acute hunger and invest in disaster preparedness and mitigation measures</i>	<i>Support or restore food security and nutrition and establish or rebuild livelihoods in fragile settings and following emergencies</i>
Outcomes for SO 2	2.1: Early-warning systems, contingency plans and food security monitoring systems put in place and enhanced with WFP capacity-development support 2.2: Hazard risk reduced in targeted communities	2.1: Improved access to assets and basic services including community and market infrastructure 2.2: Stabilised or reduced under-nutrition, including micronutrient deficiencies among children aged 6-59 months, pregnant and lactating women, and school-aged children 2.3: Capacity developed to address national food insecurity needs
<i>Strategic Objective 3</i>	<i>Restore and rebuild lives and livelihoods in post-conflict, post-disaster or transition situations</i>	<i>Reduce risk and enable people, communities and countries to meet their own food and nutrition needs</i>
Outcomes for SO 3	3.1: Enrolment for girls and boys, including IDPs and refugees, in assisted schools stabilized at pre-crisis levels 3.2: Reduced acute malnutrition in targeted populations 3.3: Improved nutritional recovery of ART and TB clients 3.4: Increased access to productive assets	3.1: Improved access to livelihood assets has contributed to enhanced resilience and reduced risks from disaster and shocks faced by targeted food insecure communities and households
<i>Strategic Objective 4</i>	<i>Reduce chronic hunger and under-nutrition</i>	<i>Reduce under-nutrition and break the intergenerational cycle of hunger</i>
Outcomes for SO 4		
<i>Strategic Objective 5:</i>	<i>Strengthen the capacities of governments to reduce hunger</i>	
Outcomes for SO 5	5.1: Progress made towards government-owned hunger solutions	

## Annex 9: Outputs achieved through FFA and FFT activities

<b>SO2: FFA</b>	<b>Unit</b>	<b>Planned</b>	<b>Actual</b>	<b>% Achieved</b>
Hectares (ha) of agricultural land benefiting from rehabilitated irrigation schemes (including irrigation canal repair, specific protection measures, embankments, etc)	ha	3,000	6,698	223%
Hectares (ha) of cultivated land treated and conserved with physical soil and water conservation measures only	ha	50	102	204%
Hectares (ha) of land cleared	ha	219	228	104%
Kilometres (km) of feeder roads rehabilitated (FFA) and maintained (self-help)	km	1,212	1,566	129%
Number of assisted communities with improved physical infrastructures to mitigate the impact of shocks, in place as a result of project assistance	community	292	396	136%
Number of excavated community water ponds for domestic uses constructed (3000-15,000 cbmt)	water pond	85	106	125%
Number of shallow wells constructed	shallow well	54	19	35%
Number of tree seedlings produced	tree seedling	20,000	20,130	101%
Volume (m3) of check dams and gully rehabilitation structures (e.g. soil sedimentation dams) constructed	m3	21,000	24,239	115%
<b>SO2: FFT</b>	<b>Unit</b>	<b>Planned</b>	<b>Actual</b>	<b>% Achieved</b>
C&V: Number of beneficiaries receiving vouchers	individual	6,067	4,140	68%
C&V: Number of men collecting cash or vouchers	individual	505	1,201	238%
C&V: Number of women collecting cash or vouchers	individual	505	2,939	582%
C&V: Total cash equivalent of food redeemed through cash vouchers	US\$	765,708	773,709	101%
C&V: Total monetary value of cash vouchers distributed	US\$	765,708	773,709	101%
Number of literacy centres assisted	centre	48	114	238%

<b>SO3:FFA</b>	<b>Unit</b>	<b>Planned</b>	<b>Actual</b>	<b>% Achieved</b>
C&V: Number of beneficiaries receiving vouchers	individual	1,800	5,878	327%
C&V: Number of men collecting cash or vouchers	individual	900	2,880	320%
C&V: Number of women collecting cash or vouchers	individual	900	2,998	333%
C&V: Total cash equivalent of food redeemed through cash vouchers	US\$	232,200	1,845,699	795%
C&V: Total monetary value of cash vouchers distributed	US\$	232,200	1,845,699	795%
Hectares (ha) of agricultural land benefiting from rehabilitated irrigation schemes (including irrigation canal repair, specific protection measures, embankments, etc)	ha	5,070	9,924	196%
Hectares (ha) of cultivated land treated and conserved with physical soil and water conservation measures only	ha	21	27	129%
Kilometres (km) of feeder roads built (FFA) and maintained (self-help)	km	190	271	143%
Number of assisted communities with improved physical infrastructures to mitigate the impact of shocks, in place as a result of project assistance	community	60	99	165%
Number of excavated community water ponds for domestic uses constructed (3000-15,000 cbmt)	water pond	26	35	135%
Number of shallow wells constructed	shallow well	137	182	133%
Number of tree seedlings produced	tree seedling	85,647	85,647	100%
Volume (m3) of check dams and gully rehabilitation structures (e.g. soil sedimentation dams) constructed	m3	15,012	15,732	105%
<b>SO3:FFT</b>	<b>Unit</b>	<b>Planned</b>	<b>Actual</b>	<b>% Achieved</b>
Number of literacy centres assisted	centre	13	15	115%

Source: SPR 2014 Outputs table



## Annex 10: Annotated Risk Management Matrix

RISK MATRIX			
Risk	Mitigation	Residual risks	Evaluation Team's comments
<p>Diversion of WFP food and sale of rations by beneficiaries results in WFP assistance appearing in markets and cross-border trade. This financial and reputational risk would affect programme implementation.</p>	<p>Shift to more targeted interventions to ensure that those most in need receive assistance, and to reduce inclusion errors. Improve standard operating procedures to reduce the likelihood of post-distribution sales by beneficiaries, clarify the roles of cooperating partners during distribution, improve targeting guidance and increase transparency.</p> <p>Establish a beneficiary feedback system [completed in mid-2010]; raise awareness about distribution modalities in radio broadcasts and other communications.</p> <p>Improve coordination with partners to ensure that targeted communities receive assistance packages that address not only immediate food needs but also underlying causes of food and nutrition insecurity.</p>	<p>Some food diversion remains.</p>	<ul style="list-style-type: none"> <li>▪ The ET did not see any formal cost-benefit analysis regarding the costs, including time consumption of increased targeting compared with the overall benefits. However, it was noticed that some cost-benefit considerations are already taken place but communication about the costs and benefits might not always be sufficient. Wet feeding, for instance, is based on self-targeting and it is generally considered that if people invest time in travel to the food distribution and lining up they will be in need. While it is recognized that there might be some beneficiaries who do not meet the criteria for being the most vulnerable, the ET agrees with the argument that targeting and verification costs might easily be higher than the derived benefits. Single ad hoc controls, to profile the beneficiaries would be useful and a non-costly investment for the PRRO and could strengthen the general accountability of the activity.</li> <li>▪ For other food distribution activities, the ET observed that all ramifications of the specific activities were not sufficiently integrated into the targeting. This is particularly the case for school meals and take home rations for girls. During the ET's visits to some schools it was noticed that school enrolment requires uniforms and notebooks. This prevents the most vulnerable families from enrolling their children. Therefore the targeting based on attendance, while logical at first sight does not lead to relief and rehabilitation for the most vulnerable.</li> <li>▪ The ET noticed that the feedback system was often referred to as 'complaint mechanism' and included general information about the mechanism, written notice on the ration cards, 'feed-back boxes', and community complains committees. While the system in principle can generate some constructive feedbacks, the efficiency of the system seems limited. During the Evaluation, beneficiaries lining up for food distribution at FFA activities seemed unaware of the feedback option. Most are illiterate and can not read information for instance on the ration cards. Moreover, the power-relation, the local traditions,</li> </ul>

			<p>including the gender structure might not be conducive of beneficiaries to use a feedback mechanism. For instance, vulnerable people will not complain to authorities, including what is generally considered as semi-authorities such as humanitarian and development projects.</p> <ul style="list-style-type: none"> <li>▪ Finally, it should be noted that the CO reports of good use of the ‘hotline’ that has been functioning for the PRRO since 2013.</li> </ul>
<p>Prevailing level of insecurity limits access to some areas of operation.</p>	<p>Employ third-party monitoring to ensure adequate coverage in inaccessible areas. Include a provision for regular cross-border monitoring under PRRO 200443, subject to funding availability. Coordinate through the food security cluster to ensure assistance is provided in inaccessible areas.</p>	<p>Access constraints limit oversight of third-party monitors.</p>	<ul style="list-style-type: none"> <li>▪ Overall, the PRRO makes good use of third party monitors as suggested as a mitigating measure in the activities under the AOs in Mogadishu, Dolo, and Galkayo. The AOs invest considerable efforts in training third party monitors at the same level as WFP’s own monitors. While it is recognized in the Risk Matrix that “Access constraints limit oversight of third-party monitors” some simple measures to compare work of third party monitors with WFP’s own monitors have not been put in place, such as using third party monitors regularly in accessible areas where comparison would be possible. During the Evaluation, some AO staff expressed concerns that third party monitors would have less sensitivity to follow WFP checklists. The ET did not find any evidence of this and considers that the independence of the third party monitors could be seen as a positive element. On the other hand, it has been noted that there are limited availability of experienced third party monitors in some areas. Overall, the ET did see little evidence of cost-benefit assessments of use of third party monitors compared to alternative strategies, including implementing partners’ own monitors or using the monitors of other partners implementing in the same area. During the Evaluation, it was noticed that the third party monitor has faced challenges with lack of cooperation from implementing partners, which is an additional risk that needs to be considered in the overall risk picture. Moreover, the insecurity situations should also be factored in when assessing the work of third party monitors.</li> <li>▪ During the evaluation, it was noted that some CPs are reluctant to work with third party monitors. Collaboration with third party monitors should be addressed more clearly in the FLAs. Moreover, INGOs should increase their cooperation for local implementation in areas with poor access.</li> <li>▪ It should be noted, though, that the CO faces some challenges in identifying third party monitors with sufficient capacity for all areas.</li> </ul>

			<ul style="list-style-type: none"> <li>▪ The ET did not see any evidence of cross-border monitoring and does not consider it a relevant mitigation measure for inaccessibility to operation areas.</li> <li>▪ The Food Security Cluster is used efficiently for coordination and overall monitoring of food assistance throughout Somalia.</li> </ul>
Insecurity puts the health and safety of WFP staff at risk; resources may be diverted or damaged.	Increase community and local authority engagement in WFP strategies and approaches. Adhere to minimum operating residential security standards.	Security risks remain.	<ul style="list-style-type: none"> <li>▪ The PRRO implements the suggested risk mitigation measures and WFP has adapted local security measures, for instance low profile missions in the border areas and armoured vehicles in Puntland. Moreover, the ET noticed that close security coordination and harmonization at the field level with international partners and transparent communication takes place regarding security keeping all staff well informed about the potential security risks.</li> <li>▪ WFP delinked the security requirements from the overall costs of the PRRO as part of the BR2 (July 2014) removing US\$5.2 million from the overall PRRO budget. With the delink security costs for ensuring the safety of WFP staff in Somalia’s highly complex security environment will be covered by the Special Operation SO 200637 “Security Augmentation In Support of WFP Operations in Somalia” running from 1 June 2014 to 31 May 2016. The delinking has allowed a greater focus on the security risk.</li> </ul>
Capacity and availability of cooperating partners and service providers are limited.	Continue training on programme issues for cooperating partner staff. Continue work to identify service providers.	There is high turnover of cooperating partner staff.	<ul style="list-style-type: none"> <li>▪ The PRRO successfully implements the suggested risk mitigation measures.</li> <li>▪ The new structure with a limited number of CPs would further mitigate this risk.</li> </ul>
Conflict spreads to new regions, affecting access.	Where feasible and in accordance with humanitarian principles, negotiate with the parties in control to allow access to populations in need. Expand third-party monitoring as necessary on the basis of lessons learned.	Certain areas remain inaccessible.	<ul style="list-style-type: none"> <li>▪ WFP efficiently and continuously monitor access constraints and opportunities, and follow the mitigation measures.</li> <li>▪ Likewise, efficient use of third-party monitoring (see above for more details).</li> </ul>
Funding environment is challenging.	Continue advocacy among donors on humanitarian needs and with the United Nations country team to draw on common humanitarian funds for food assistance.	Funding risk remains because of operational context.	<ul style="list-style-type: none"> <li>▪ WFP has put in place an effective communication strategy with donors. The activities, including transparency and monthly donor meetings are highly appreciated by donors.</li> </ul>

			<ul style="list-style-type: none"> <li>There are some remaining and manageable aspects that might influence the donor situation, including continuously strengthen data quality, including baseline data.</li> </ul>
Requirements increase for populations in and fleeing from inaccessible areas.	Continue advocacy for funding through humanitarian mechanisms and from donors. Revise distribution criteria if necessary.	Sudden influx of beneficiaries from inaccessible areas affects resources. Further banning of United Nations agencies and NGOs leads to reduced ability to meet existing needs.	<ul style="list-style-type: none"> <li>The mitigation measures are being implemented. The differentiated, flexible and scalable framework furthermore ensures combined with a reasonable contingency budget line efficiently address the risk.</li> </ul>
<b>Contextual Risks</b>			
Security threats and instability affect communities.	Installation of permanent Government following recent elections.	Society remains fractured and several local administrations remain in place.	<ul style="list-style-type: none"> <li>The suggested risk mitigation measure is not a measure that WFP control. However, the ET considers that the increasing integration of local authorities and governments in PRRO activities, including capacity development contributes to the stabilization in the country.</li> </ul>
Challenges in conducting population census: various estimates by the United Nations and World Bank.	Develop a village-level database to prioritize where relief assistance is programmed, taking into account population data and political and socio-economic vulnerability indicators. [completed] Use nutrition programming and screening to determine household food requirements. Update population data. [the United Nations Population Fund, with support from WFP]	Exclusion or inclusion errors at the village level in certain areas remain.	<ul style="list-style-type: none"> <li>The mitigation measures have been partly implemented. As shown in the main evaluation report UNFPA's Population Estimate Survey has been completed and in principle accepted by the Government. WFP should update all beneficiary planning numbers based on the new data.</li> </ul>
<b>Programmatic Risks</b>			

Cash and voucher transfers are at risk of inflation or currency fluctuation, with recipients unable to purchase sufficient food; supply may be affected by market closures or shortages.	Determine through monthly evaluations whether transfer values or modalities require modification. Continue market monitoring and capacity development.	Fluctuating transfer values affect beneficiaries	<ul style="list-style-type: none"> <li>▪ The mitigation measure is reasonable and could be combine with information from FSNAU / FEWSNET market monitoring database,</li> </ul>
Food and non-food assistance is diverted.	Conduct systematic monitoring and spot checks for all activities. For cash and vouchers, implement: i) penalties for and disqualification of traders not adhering to regulations; ii) review of beneficiary selection procedures and verification of beneficiary lists using identity cards; iii) increased security measures at distribution points; iv) confidential beneficiary lists; and v) timely and systematic disbursement of funds and verification.	Access limitations contribute to residual risk of diversion.	<ul style="list-style-type: none"> <li>▪ WFP has put in place an efficient monitoring system for food distribution, including post-distribution beneficiary interviews and the hotline. As discussed above, though, there measures need to be followed up by capacity building of beneficiaries and other local stakeholders in keeping authorities and WFP accountable.</li> </ul>
Difficulties in monitoring interventions are compounded by a reliance on cooperating partners and third-party monitoring.	Develop standard monitoring procedures for cooperating partners. If security deteriorates, deploy third-party agencies or suspend interventions. Improve monitoring and evaluation to balance compliance requirements with quality and to better inform programme design and implementation.	Diversion risk remains because of lack of direct oversight by WFP staff. Limited monitoring coverage or a continued focus on compliance leads to limited	<ul style="list-style-type: none"> <li>▪ The mitigation measures are sound. However, the first two years of operation has proven challenges with harmonizing monitoring with other UN partners for the Joint Resilience Strategy.</li> </ul>

		outcome level or impact analysis of operations.	
Household ration sizes based on families of six people may not correspond to actual numbers of people.	Shift to a more targeted approach to reach the most vulnerable; review distribution criteria and distribute food on the basis of actual family size (if possible).	Households report highly inflated member numbers that do not lead to corrected ration sizes.	<ul style="list-style-type: none"> <li>▪ The community level database for relief assistance should be implemented for all operation activities.</li> </ul>

## **Annex 11: The Somalia Food Security and Nutrition Analysis Unit (FSNAU)**

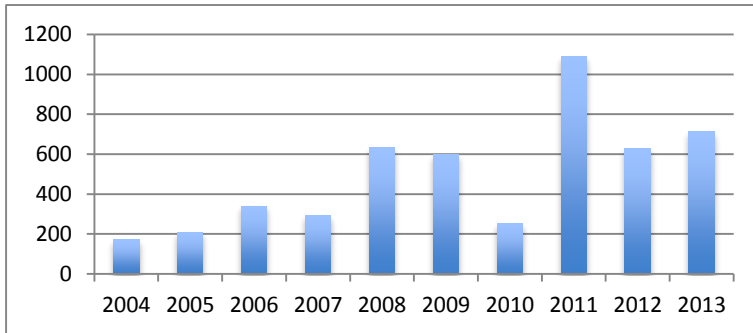
General food security monitoring in Somalia relies primarily on a few key institutions:

- The FSNAU carries out biannual surveys combined with specific analysis and complemented by prompt additional rapid assessments when required in response to major changes in conditions. Because of access issues much of SCZ are not covered by on-the-ground monitoring for the seasonal assessments but rely on focus group discussion by telephone and supported by local enumerators.
- The Food Security Cluster monitors both needs and responses as well as risk assessments.
- FEWSNET carries out regular food security monitoring, including market assessments typically in collaboration with FSNAU.

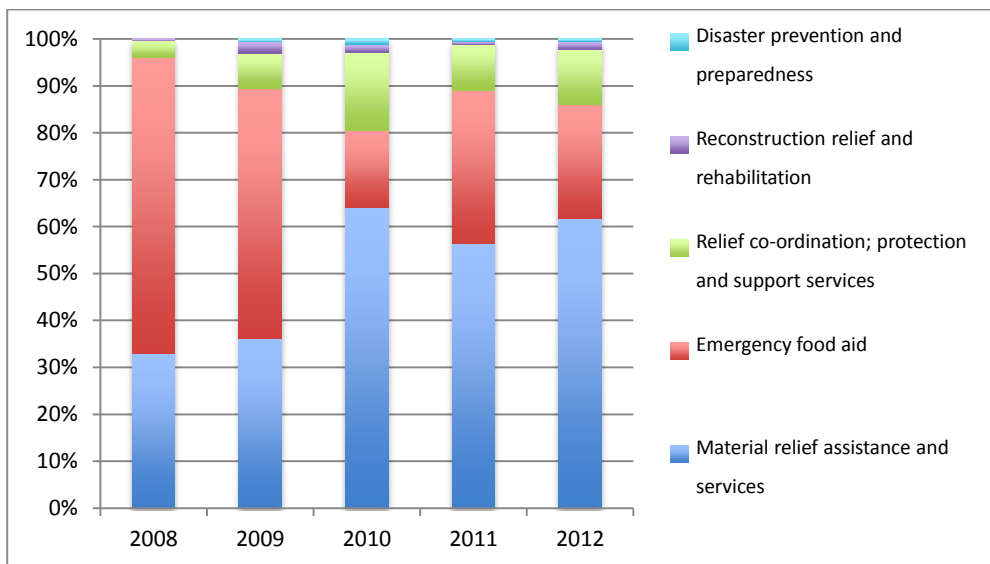
The PRRO collaborates appropriately with all these institutions in the seasonal assessments and ad-hoc analysis. In addition, the VAM unit prepares rapid initial assessments on an ad hoc basis including in very high risk places, which is particularly appropriate considering that the seasonal assessment typically will not have on-the-ground level assessments in much of SCZ due to security concerns.

**Annex 12: Additional Figures**

**Figure 1: International Humanitarian Assistance to Somalia 2004 – 2013, million US\$<sup>176</sup>**



**Figure 2: Distribution of International Humanitarian Assistance to Somalia 2008 – 2012<sup>177</sup>**

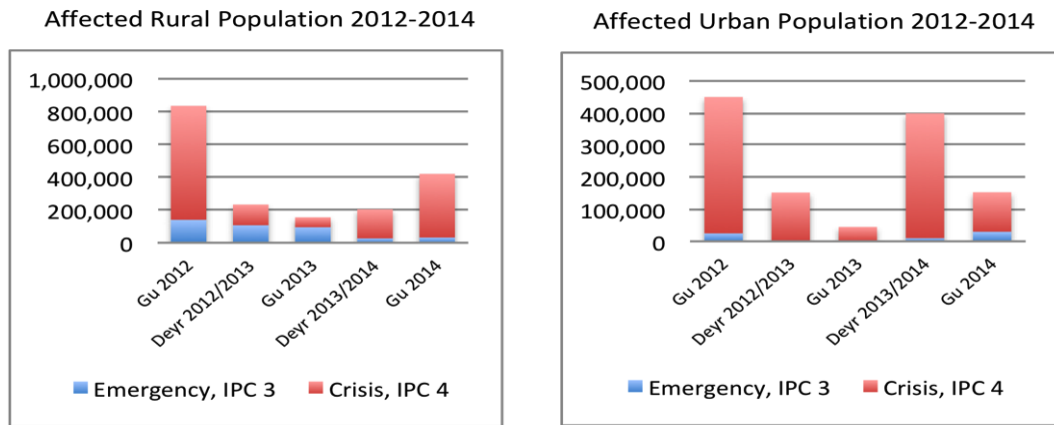


<sup>176</sup> Source: Global Humanitarian Assistance ([www.globalhumanitarianassistance.org](http://www.globalhumanitarianassistance.org)) based on data from Development Initiatives calculated from data from OECD DAC, UN OCHA Financial Tracking System, and UN CERF. Data in constant 2012 prices.

<sup>177</sup> Source: Global Humanitarian Assistance ([www.globalhumanitarianassistance.org](http://www.globalhumanitarianassistance.org)) based on data from Development Initiatives calculated from data from OECD DAC Creditor Reporting System. Data in constant 2012 prices

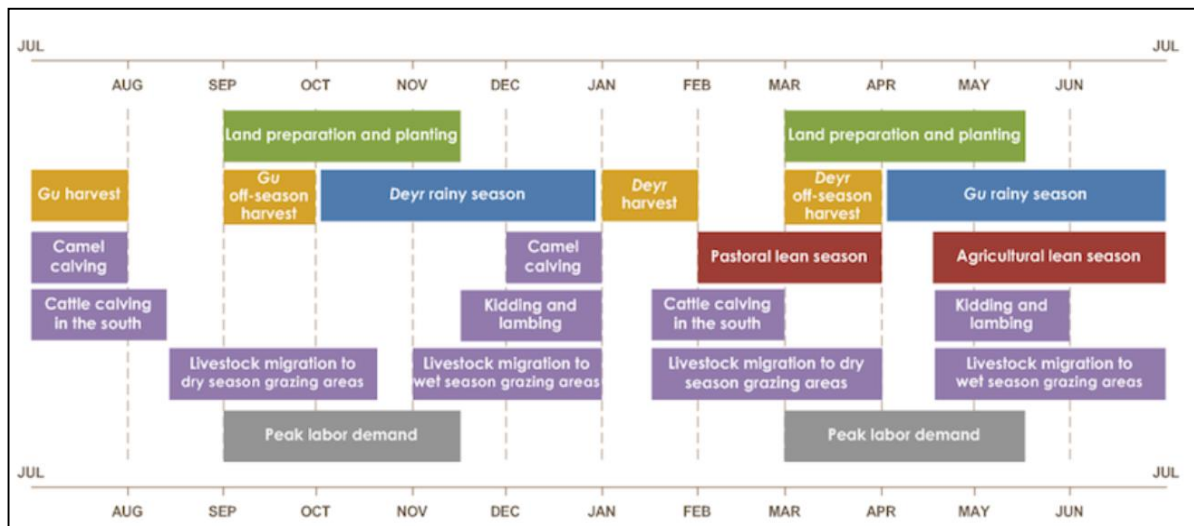


**Figure 3: People affected by Food Insecurity**



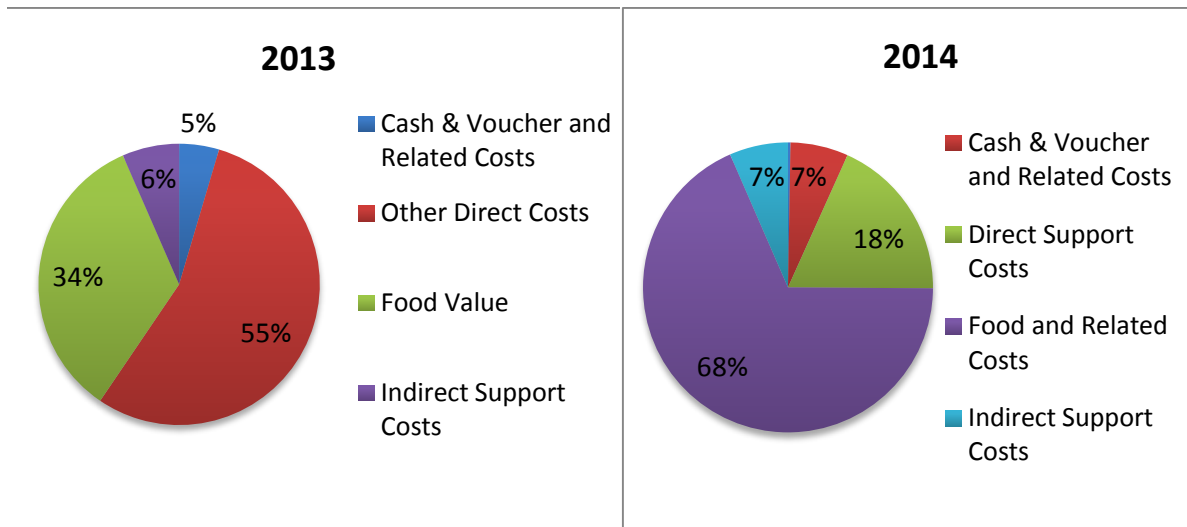
Source: WFP (2014) "Trend Analysis and Nutrition Insecurity in Somalia 2007-2014"

**Figure 4: Agricultural Seasonal Calendar<sup>178</sup>**

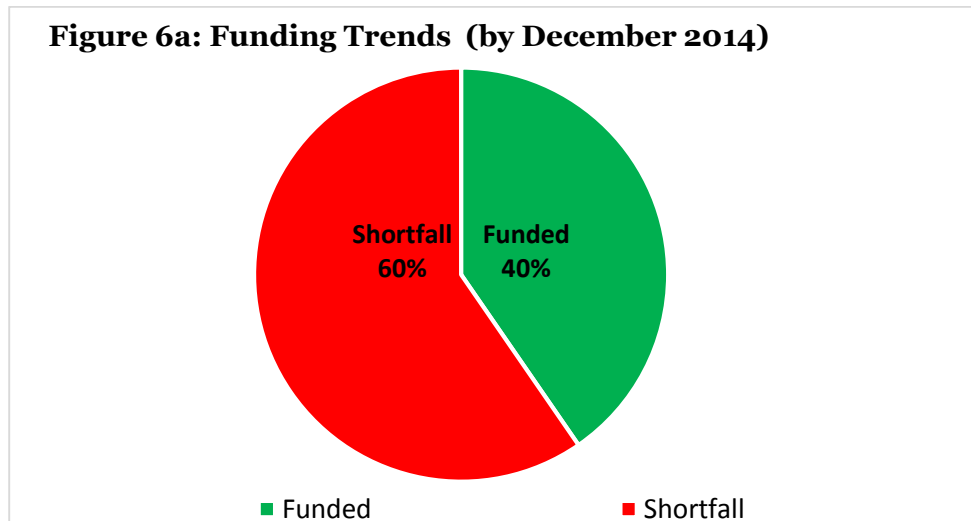


<sup>178</sup> Source: Few's Net

**Figure 5: Planned Cost Distribution**

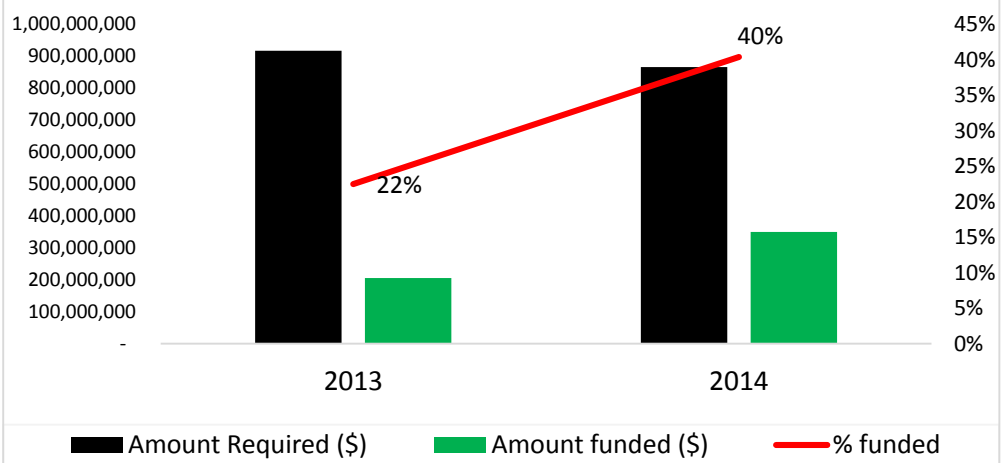


**Figure 6: Funding Situation<sup>179</sup>**



<sup>179</sup> Source: Information provided by CO for funding through 31 December 2014 and WFP Resource Situation 3 Nov 2014.

**Figure 6b: Funding trends**



**Figure 7: Planned vs. Actual Beneficiaries**

Beneficiary numbers - Planned versus actual								
		Planned (as per PD/BR)			Actuals (as per SPR)			% achieved
		Male	Female	Total	Male	Female	Total	
Year 1 (2013)	Blanket SFP (seasonal)	86.480	97.520	184.000	82.968	95.998	178.966	97%
	Targeted SFP	219.349	570.651	790.000	166.171	436.471	602.642	76%
	TB/HIV nutrition	50.000	50.000	100.000	50.360	34.997	85.357	85%
	School meals	55.000	45.000	100.000	60.869	56.187	117.056	117%
	Cash/food incentive for girls' attendance	-	45.000	45.000	-	45.821	45.821	102%
	CFA/FFA/FFT	26.584	26.584	53.168	67.604	70.798	138.402	260%
	Relief (GFD)	316.050	328.950	645.000	164.864	171.593	336.457	52%
	IDPs	121.712	116.939	238.651	61.000	63.489	124.489	52%
	MCHN - Mother and child health and nutrition	not included	not included	-	not included	not included	-	0%
	MCHN - delivery incentive	not included	not included	-	not included	not included	-	0%
	<b>Sub total Year 1</b>	<b>875.175</b>	<b>1.280.644</b>	<b>2.155.819</b>	<b>653.836</b>	<b>975.354</b>	<b>1.629.190</b>	<b>76%</b>
Year 2 (2014)	Blanket SFP (seasonal)	108.100	121.900	231.000	163.004	290.481	453.485	196%
	Targeted SFP	152.750	347.250	500.000	85.678	170.201	255.879	51%
	TB/HIV nutrition	54.500	54.500	109.000	27.817	19.331	47.148	43%
	School meals	82.500	67.500	150.000	51.845	42.763	94.608	63%
	Cash/food incentive for girls' attendance	-	67.500	67.500	-	67.500	67.500	100%
	CFA/FFA/FFT	275.000	275.000	825.000	37.302	38.824	76.126	9%
	Relief (GFD)	291.800	288.200	580.000	177.775	185.031	362.806	63%
	IDPs	not included	not included	not included	65.776	68.461	134.237	0%
	MCHN - Mother and child health and nutrition	45.120	114.880	160.000	not included	not included	-	0%
	MCHN - delivery incentive	176.400	183.600	360.000	not included	not included	-	0%
	<b>Sub total Year 2</b>	<b>1.186.170</b>	<b>1.520.330</b>	<b>2.982.500</b>	<b>609.197</b>	<b>882.592</b>	<b>1.491.789</b>	<b>50%</b>
<b>Total</b>	<b>2.061.345</b>	<b>2.800.974</b>	<b>5.138.319</b>	<b>1.263.033</b>	<b>1.857.946</b>	<b>3.120.979</b>	<b>61%</b>	

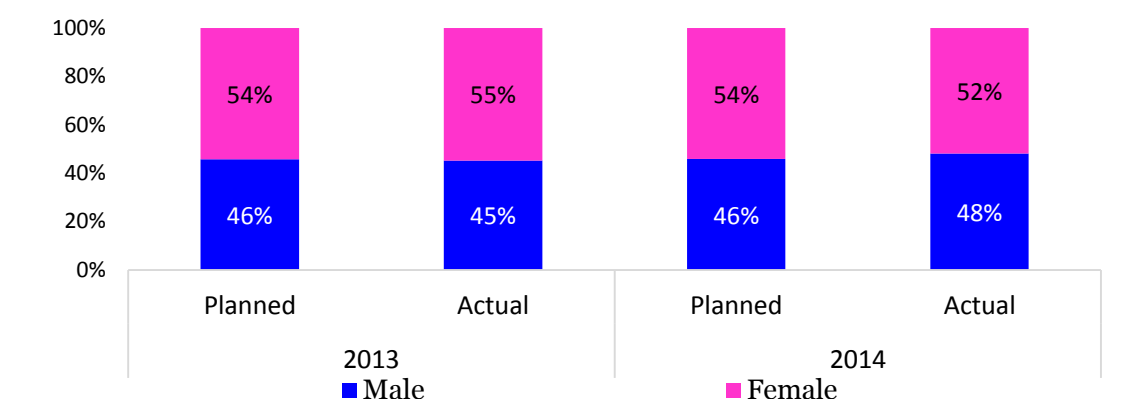
**Sources:** Planned 2013 (SPR 2013), Actual 2013 (SPR 2013), Planned 2014 (Budget Revision 02), Actual 2014 (SPR 2014)

**Notes:**

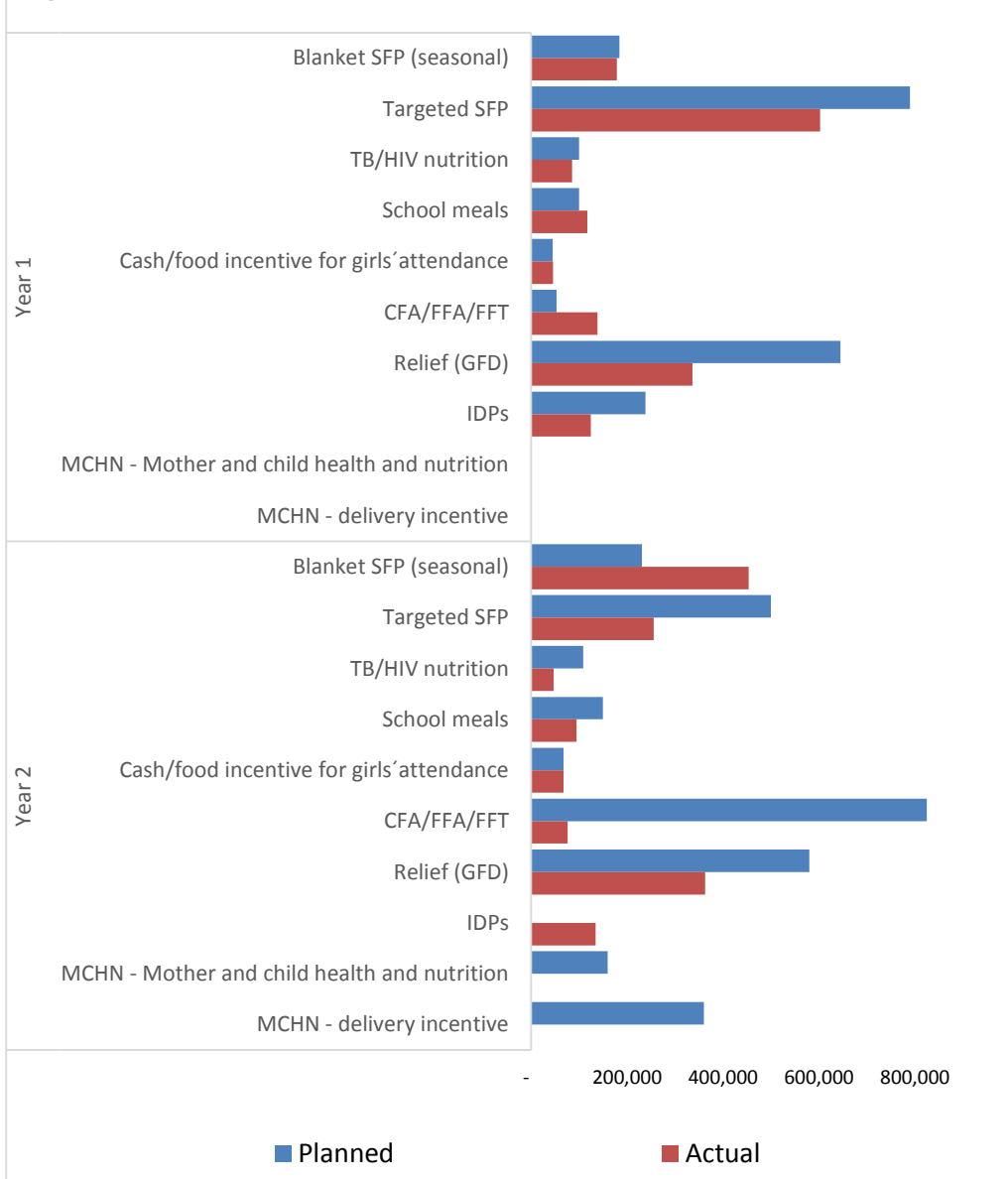
- 1) Planned beneficiaries do not match between the SPRs and the Budget Revision 02 / Project Document
- 2) The Project Document does not give a breakout between males and females.

For this reason the data from the SPR has been used for planned figures in 2013.

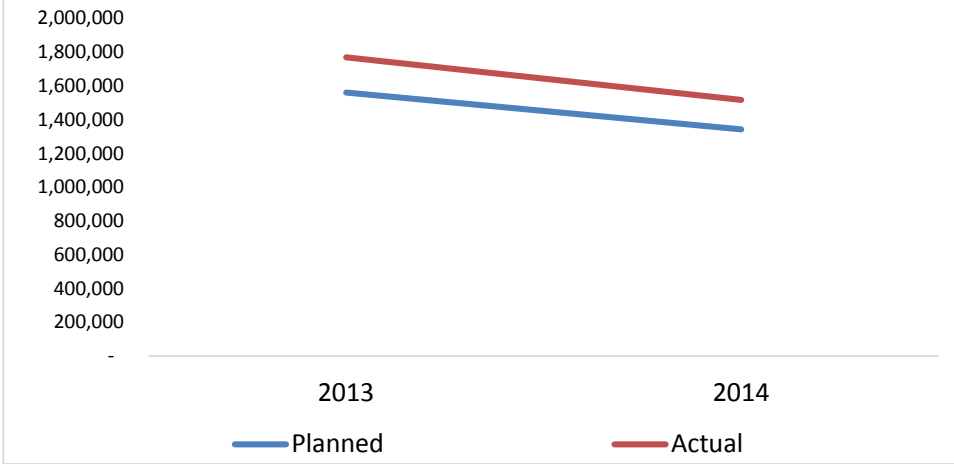
**Figure 7a: Beneficiary proportion by sex**



**Figure 7b: Planned and actual beneficiaries**



**Figure 7c: Summary of Planned and actual beneficiaries over time**



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## Acronyms

ALNAP	Active Learning Network for Accountability and Performance in Humanitarian Action
AO	Area Office
ART	Antiretroviral Treatment
BCC	Behavioral Change Communication
BR	Budget Revision
BSFP	Blanket Supplementary Feeding Programme
CHW	Community Health Worker
CNW	Community Nutrition Worker
CO	Country Office
CP	Cooperating Partner
CSB+	Corn Soy Blend Plus
DOTS	Daily Observed Treatment
DRC	Danish Refugee Council
EB	Executive Board
EM	Evaluation Manager
EPHS	Essential Package of Health Services
EQAS	Evaluation Quality Assurance System
ER	Evaluation Report
ET	Evaluation Team
FCS	Food Consumption Score
FEWSNET	Famine Early Warning System Network
FFA	Food for Asset
FFT	Food for Training
FLA	Field Level Agreement
FSNAU	Food Security and Nutrition Analysis Unit
GAM	Global Acute Malnutrition
GBV	Gender Based Violence
GDP	Gross Domestic Product
GFD	General Food Distribution
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome
HQ	Headquarters (WFP)
IFAD	International Fund for Agricultural Development
IMAM	Integrated Management of Acute Malnutrition
IP	Inception Package
IPC	Integrated Phase Classification
IYCF	Infant and Young Child Feeding
JAM	Joint Assessment Mission
JHNP	Joint Health and Nutrition Programme
KAP	Knowledge Attitudes and Practice
LOS	Length of Stay
LTA	Long-Term Agreement
LTSH	Land Transport, Storage, and Handling
M&E	Monitoring and Evaluation
MAM	Moderate Acute Malnutrition
MCH	Maternal and Child Health
MCHN	Mother and Child Health and Nutrition
MDG	Millennium Development Goal

MOH	Ministry of Health
Mt	Metric Ton
MUAC	Mid-Upper Arm Circumference
NACS	Nutrition Assessment Counselling and Support
NFI	Non-food-item
NGO	Non-Governmental Organisation
ODA	Official Development Assistance
OEV	Office of Evaluation
OpEV	Operation Evaluation
OTP	Outpatient Management of Acute Malnutrition
PESS	Population Estimation Survey for Somalia
PLHIV	People Living with HIV
PLW	Pregnant and Lactating Women
PRRO	Protracted Relief and Recovery Operation
PSG	Peace building and State building Goal
RB	Regional Bureau
RUSF	Ready to Use Supplementary Food
SAM	Severe Acute Malnutrition
SCZ	South Central Zone
SFP	Supplementary Feeding Program
SOP	Standing Operation Procedures
SPR	Standard Project Report
SQUEAC	Semi-quantitative Evaluation of Access and Coverage
SUN	Scale Up Nutrition
TB	Tuberculosis
THR	Take Home Ration
ToR	Terms of Reference
TSFP	Targeted Supplementary Programme (treatment of MAM)
UN	United Nations
UNHCR	United Nations High Commission for Refugees
VAM	Vulnerability Analysis and Mapping
VFT	Voucher for Training
WASH	Water and Sanitation Hygiene
WF	Wet Feeding
WFHZ	Weight for Height (Z score)
WFP	World Food Programme
WHO	World Health Organisation

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